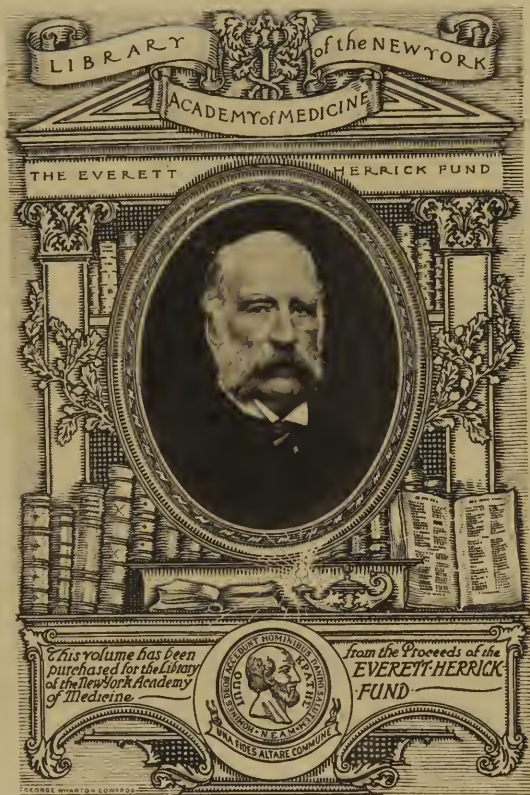


THE BOOK OF HOME NURSING

A Practical Guide
for the Treatment of
Sickness in the Home

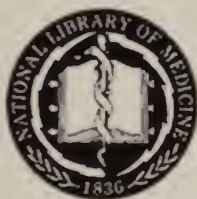
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WHEN YOUR PATIENT CAN EAT FROM A TRAY, MAKE THE MEALS
DAINTY AND ATTRACTIVE

[Page 59]

THE BOOK OF HOME NURSING

A PRACTICAL GUIDE FOR THE
TREATMENT OF SICKNESS
IN THE HOME

BY

FRANCES CAMPBELL

(MRS. GEORGE E. CAMPBELL)

GRADUATE OF HOSPITAL OF ST. BARNABAS, NEWARK, N. J.

THE N. Y. ACADEMY
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To

G. E. C.

AND IN MEMORY OF

ISABEL GORDON CURTIS

AT WHOSE SUGGESTION THIS BOOK

WAS WRITTEN

A WORD WITH THE READER

It is quite impossible to tell where one learns everything, and in making this little book, I know I have been more or less of a pirate. No book on nursing could be entirely original, just as no arithmetic or grammar could be original. Each book tries to put the same facts in a simpler or more interesting form. Some of the ideas are my own, things I worked out for myself while nursing; some I received with my hospital training; some from friends who are hospital nurses or superintendents, and many others from books written by doctors and nurses, who, like myself, have tried to help a little in this world where so much help is needed.

For many helpful suggestions I wish to thank Miss Amy Ames Bliss of the Henry Street Settlement House, New York, and Miss Emma H. McGall, superintendent of The Hospital of St. Giles for Cripples, Brooklyn.

FRANCES CAMPBELL.

March 30, 1917.

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THE BOOK OF HOME NURSING

The Book of Home Nursing

A WORD WITH THE NURSE

A little girl came home from kindergarten one day, chanting,

“Politeness is to do and say,
The kindest thing in the kindest way.”

A parody on this for nurses might be,

“Nursing is to do each day,
The kindest thing in the cleanest way.”

The kindest thing is not always the easiest thing for either the patient or the nurse, but always the best in the end.

This book is not written for trained nurses or for those who can send for a nurse whenever desired, but for those, and there are many, who knowing absolutely nothing about nursing still must care for their sick and afflicted. In many homes the father of the family has only as much in a week for

2 THE BOOK OF HOME NURSING

all his expenses as it would take to pay a trained nurse.

Though my hospital days are far behind me and I have been a housekeeper for years, many times I hurry out to answer some agonized call on the telephone. One of my neighbors has burned her arm or some child is to have adenoids removed and the mother, losing the nerve which she so proudly thought she possessed, just sends for me. This is not considered an unusual service in the village where we have grown up together and where we give our skill as gladly as we share the fruit and flowers from our gardens.

Sometimes a nurse who has been on duty for a long time, without sleep, gets forty winks while I watch her patient, or a baby is coming and the nurse who has been engaged is not there to meet him. Will I not act as reception committee, until she arrives?

In many homes I have found absolutely no idea of the simplest things to be done in sickness, and they all say, "How do trained nurses make such comfortable beds?" "How do you feed liquids to a person who is flat on his back, without leaving most of it on the outside?" Many ask, "What shall I give him to eat?" For in a small town

where there is no nurses' register, and where in many cases a nurse could not be afforded, advice is often sought.

Very often all the nursing required is to give medicine regularly, make the patient comfortable in bed, and prepare food ordered by the doctor. I cannot be too emphatic about obeying the doctor's orders. The best nurse is one who does not try to diagnose cases and order medicine for her patients, but who gives treatment, baths, and nourishment on time, keeps her patient comfortable and if possible happy.

Because a woman has served a stated time in a hospital, under a competent superintendent and many doctors, because she has studied books written for her instruction, and put into practice, day after day in the wards of the hospital, the theories which she has learned, she is called a trained nurse. A trained nurse never takes the place of a doctor and does not expect to diagnose cases or recommend treatment, but many times, in cases of emergency, she must be able to act promptly to save her patient's life. She does not do things because some of the neighbors advise it, or because she has heard it is a good thing to do. What she does is done because she knows it is the

thing to do, is what the doctor would do if he were present, and therefore because she is trained she is allowed to use her knowledge, sometimes called using her judgment, and the greater her knowledge or judgment and the quicker she acts upon it the more she is valued by the doctors who employ her. Home nurses, not being trained, are not allowed this latitude in judgment. They must follow exactly the orders of their doctor, and he will tell them what emergencies may arise and also how to meet them.

If food or medicine is ordered for eight o'clock, give it at that time, not before or after, unless the doctor should say, "If she is sleeping you need not disturb her." Sometimes sleep is better than medicine, but the doctor must be the judge of that. Then again the baths and the care of the patient should be given as regularly as possible. When one is sick and weary, waiting for things is very hard, and no one but he who has been sick in a wrinkled bed and untidy night clothes knows the perfect luxury of a bath, brushed hair, and cool smooth sheets and pillow-cases.

Prompt and cheerful service is not only grateful to the patient but is as good as medicine. If possible, one member of the family should be free to care for the patient and make his necessities her

first consideration. Many times the mother of the house must be cook, housekeeper, and nurse as well, and it is a strenuous task to perform the very numerous duties of a house-mother, at the same time keeping a convalescent child happy. Every mother knows that while she is not as worried about her child during convalescence as when he is very ill, he is much harder to care for, to keep amused, and covered in bed.

The irritating things which occur in every household should be kept from the patient. Do not tell the sick mother that her favorite cup and saucer are broken or that the baby across the street has died, nor the father that the kitchen drain is frozen up. Try to manage the uncomfortable things without discussing them within the hearing of the patient. Things which he is not able to help are doubly irritating, first, because of the annoyance to the family and, second, because they emphasize his helplessness.

Never tell a patient how hard it is to take care of him and how tired you get doing it. This will seem an unnecessary warning to people of good taste, but I assure you it is done many times and causes heartache and depression to helpless persons.

6 THE BOOK OF HOME NURSING

Keep the air clean and fresh in the sick room. Fresh air and sunshine are nurses in themselves. Some diseases are cured by nothing but nourishing food, fresh air, and sunshine.

A thoughtful nurse watches her patient and anticipates his wants. Many people will go without a much-needed comfort rather than ask for it, and, on the other hand, having someone at their beck and call to run at their slightest wish makes tyrants of others. The nurse will soon learn which kind of patient she has to deal with and govern herself accordingly.

One of the hardest things to guard against is the friendly visit of a relative or neighbor. The doctor must be asked about the number and length of visits the patient may receive and then his orders must be religiously obeyed. One visitor at a time, unless in a case of advance convalescence, is all that a patient should have. When you admit the guest to your patient's room tell him smilingly, "The doctor says you may stay ten minutes." In ten minutes take your courage in hand, go back and tell him the time is up. Sad to say some people will be offended, for many kindly intentioned friends are firm believers that no matter how much other people might tire the

sick man, they could not possibly hurt him. Such ones must be handled with tact, but they must be gotten out in some way.

Do not sit on the bed or let others do so. It is most annoying to the patient, especially if she have a headache or a broken bone. I once heard of a stout woman who sat on the side of the bed in order that she might better see the two-hour-old baby. Her weight was just a little more than the bed could stand, so down they all went in a heap, the stout woman, the mother, and the brand-new baby. Such things are trying to a woman whose baby is only two hours old.

Trust your doctor. If for any good reason you cannot trust him, get another. The doctor, the nurse, and the family must work in harmony, and the patient must be made to feel that everything is being done for her wisely and well. Remember that a contented state of mind, pleasant surroundings, a clean comfortable bed, prompt cheerful nursing, and proper food are the things which count full as much as medicine. Any doctor will tell you this.

GENERAL CARE OF THE PATIENT

Sometimes when there has been a horrible blunder, we learn that the engineer was too tired, because he had been taking care of a sick wife during his hours for sleeping; that the druggist was over-worked when he gave the wrong powder, or that the nurse who had been on duty too long had done some dreadful thing.

The human body will not endure everything, and in order to take care of others we must take care of ourselves.

A trained nurse was called for a sick child. She went on duty at ten A. M. and cared for her little patient until ten the next morning,—twenty-four hours. He needed almost constant attention and she had no chance to rest. The second morning the mother came to the room dressed for the street and announced that she was going shopping, asking if anything was needed from town. The nurse gave her the list of articles required and asked, "Who will stay with the patient while I sleep?"

The mother was amazed and said, "Sleep! Do you have to sleep? I thought you were a trained nurse."

Many people, sad to say, have the same idea, and it is necessary at times for the doctor to arrange rest hours for the nurse. But home nurses have to arrange this for themselves and many times feel they are selfish if they take the rest they really should have. In order to take the best care of your patient, you must also take good care of yourself, eat your meals regularly, and eat nourishing ones. Do not feel time spent on yourself is wasted. If you must be up very much in the night, have a warm drink and something to eat. Try to get out of doors every day if only for a few minutes. There is almost always someone who can watch your patient for a little while. Take your baths regularly and be careful to keep your bowels in good order. Irregular hours sometimes upset regular habits. If you find this to be the case, eat the food which is directed for such an emergency. If this does not correct the trouble, take a cathartic. You owe it to both your patient and yourself to keep in good condition, both physically and mentally. If you must sew or mend for the family while sitting with your

patient, pick out the easiest chair you can find. Always rest as much as you can. Tired people are much more inclined to get sick than those who are rested. Keep your clothing as clean and fresh as possible. It adds to your own self-respect and makes you more attractive and therefore more soothing to your patient.

Do not rock in a squeaky chair. It is best not to rock at all, for such little things tire sick people. If a blanket or quilt has stripes, ask the patient, unless you know already, which way she prefers to have the stripes run. I know a woman who is a very sensible, reasonable person in her normal state and who was worried almost to tears because a quilt was put over her with the stripes running across the bed. She thought it too silly to speak of and did not, which was the silliest thing of all, for the nurse would have been more than glad to arrange it in the other way had she only known.

With some diseases the room must be cold, having plenty of fresh air even in the winter. Be careful about protecting yourself with extra clothing. A shawl is a nuisance, for it always dips into things and slides off one's shoulders. Wear a knitted or a flannel jacket or a sweater. Be careful at night. Have slippers and wrapper or

kimono by your bed or cot so you may hop into them at a moment's notice, for if you take cold and are sick there will be two patients to care for, and the last state of your family will be worse than the first.

If you have time to sit down, don't spend that time crotcheting lace or doing embroidery but put your feet up on another chair, and if you do not care to read a good story, fold your hands in your lap, relax your tired muscles, and just rest.

Attend to the necessities of your patient as early in the morning as possible. Take her a basin of warm water, soap, wash cloth and towel, and things for cleaning her teeth. If she is not too ill, she will enjoy washing her face and hands and cleaning her teeth herself. If you must do it for her, do not wet her hair, get soap in her eyes, or rub her nose up instead of down. Some will laugh at these directions and others do exactly these things if not warned. If your patient is not well enough to brush her teeth, take a small strand of absorbent cotton, twist it around your index finger, dip the finger in water, a mouth wash, or water to which a little lemon and glycerine has been added. Clean the teeth with this, very gently, and do not gag her. Clean back of the wisdom teeth, the

gums, and the tongue, renewing the cotton frequently. Let the patient rinse her mouth with water, holding a glass half full to her lips. It will not spill down her chin and neck if the glass is not full and is handled carefully. Help the patient to hold her head by placing your hand under the back of the neck. Do not put your hand under her head to raise it, as that tips it forward in an uncomfortable position. Put a basin close to her cheek and turn her head gently so she may let the water run in the basin. Let her rinse her mouth two or three times if she likes.

During fevers the mouth often needs great care and should be washed each time milk or nourishment is given. Wash with cotton on the finger as directed, and with tiny bits of absorbent cotton wound on the end of toothpicks clean between the teeth, taking great care not to injure the gums. In case this is necessary the doctor will prescribe a mouth wash.

When working around the patient, do not use quick, jerky movements. It is most trying to tired nerves. Be as gentle and as sympathetic as possible. If your hands are cold, hold them in hot water a few minutes before going to your patient.

Never put a cold bedpan under the patient's back. Pour hot water over the pan and dry before using. When you remove it, cover at once with a cloth, kept for that purpose. The patient should be bathed and dried carefully each time after using the bedpan.

One of the smallest but most bothersome things which those in bed have to endure is a torturing crumb. Tiny bits of toast or bread become very dry or hard and are as sharp as needles and as irritating as fleas. The tray removed (which by the way should be done as soon as the patient has finished eating), with a whisk broom remove all crumbs from the sheets. Turn the patient on her side, brush under her back, then turn her again and brush the other side of the bed. Do not trust all to the whisk broom, but put your hand under the patient to be sure not one crumb escapes you.

Always keep the sheets pulled tightly across the bed, as wrinkles are most uncomfortable, and if lain on for any length of time, will make tender or sore places on the flesh. If your patient lies in one position for a long time watch carefully the back, hips, heels, and elbows, especially the lower part of the back, and rub them with alcohol, and dust with talcum powder every time you have a

chance. Whatever happens, your patient must never have a bed sore. If the skin looks red or for any reason you cannot keep your patient dry, call the attention of the doctor to this. Do not wait until the skin is broken before telling the doctor. If you find a red place on the hip or back, rub it well with alcohol or with vinegar or water, powder it and put a ring (made from cotton and a bandage) under your patient, with the red place over the opening in the ring, until you have an opportunity to show it to the doctor. A bed sore or a burn is a very bad thing for the patient in her weakened condition and also a disgrace to the nurse who cares for her. Always remember that your doctor is not a mind reader and never feel that anything is too trivial to tell him. Doctors are more than grateful for interested, intelligent coöperation and all are anxious to avoid bed sores and will help you with the ounce of prevention which in this case is worth tons of cure.

There are air cushions made of rubber which are fine for placing under the back and heels, but if they are not to be had, take a roll of cotton and make a ring, then wind with narrow strips of muslin or cheesecloth (strips of an old sheet will do), and place this under the back. It may not be

comfortable very long but can be taken away and tried again after a while.

If your patient must lie on her back, place a pillow under her knees. This relieves the strain on the muscles and keeps her from sliding down in bed. A small or thin pillow is a great comfort if placed between the knees when lying on the side. This also relieves the muscles and prevents the skin of the knees from becoming sore. The small pillow can be used in numerous positions and is a great satisfaction to a sick-in-bed. It can be placed under the aching back, the rheumatic arm, or tucked up comfortably under the lame foot or ankle. By turning the patient on her side, with the pillow tucked snugly at her back and another between her knees, she may forget her ills in a refreshing sleep.

Your patient may like a large pillow, and if your pillows are small, slide two into one pillow slip to make a large one. This is more satisfactory than two pillows in separate cases, one on top of the other, as they slide about and are annoying.

When preparing your patient for a nap or for the night, be sure that the sheet and blanket come high enough to cover her shoulders. It is trying to have a cold spot on one's shoulder and the bed

clothing tucked in at the foot so tightly one cannot pull it up.

If your patient has long hair which snarls, put a little olive oil or alcohol and water on the snarls and then pick them out with your fingers. If you have a rubber cloth, cover it with a towel and put it over the pillow while doing this and thus save soiling the bed. If you have no rubber sheet, use a paper in its place. Wash the patient's comb and brush in cold water and ammonia. Keep her hair neat, combing it each morning and again at night, if you have time and she likes to have it done. Comb from the bottom, holding the hair firmly in your left hand about six or eight inches from the ends and not pulling on the scalp. With the other hand comb gently, removing the snarls from the six or eight inches below the left hand. If the hair is held tightly it will not pull. After the snarls are out of that part, move the left hand up a few inches and comb as before. Pick out the snarls with your fingers and do not break the hair. If your patient is very ill and tires easily, comb only one side of her hair at a time. If at the beginning of her illness her hair is parted in the back and braided in two braids you will have little trouble with snarls. A heavy wash cloth, wet in



BEGIN TO COMB AT THE END OF THE HAIR AND WORK
TOWARD THE HEAD. HOLD THE HAIR TIGHTLY
BETWEEN THE HEAD AND THE COMB



FOLD THE CORNERS OF THE BLANKET, WHICH ARE OVER THE
ARMS OF THE CHAIR, AROUND HER LEGS; FOLD THE
CORNER ON THE FLOOR UP OVER HER FEET AND
YOU HAVE HER IN A BLANKET ENVELOPE

alcohol and water and wrung tightly is very good for cleaning the hair and scalp and is refreshing.

Sometimes an otherwise clean sheet will have a soiled spot on it. Wash out the spot; dry, air, and put away until you need another drawsheet. Never cover up a spot.

The bed must stand where the light will not shine in the patient's eyes, for the eyes are weak as well as other parts of the body. A lamp shade must be used at night. A tiny lamp gives light enough, or if a light is not needed all the time, a candle will do, and is much better than a large lamp turned down or shaded, for that spoils the air and as the polite old lady said, "Makes a disagreeable effluvia."

If all your pillows are in use and you have none to spare to put under your patient's knees, roll a comfortable and slide it into a pillow-case or make a homemade knee rest.

A relapse is usually caused by too much food, the wrong kind of food, an attempt to get up before the patient is strong enough, or by too many visitors.

Have an extra blanket or quilt to put over your patient toward morning, as her vitality is lower at that time and she will be cold, with the covering

which would keep her comfortable during the day or early part of the night.

If your patient is sick in hot weather you will have to do many things to keep her cool. A wet sheet hung in a window or outer door cools the air. If you have a water system, fasten the hose so that the water may fall in front of your patient's window. Placing cloths wrung out of cold water on her head will be refreshing. Rub the back gently with alcohol and dust with talcum powder. Keep wrinkles out of the nightdress and turn the pillows often. Move the patient from one side of the bed to the other, for in very hot weather she will feel as if she were lying on a mustard plaster.

If for any reason you cannot keep the bed dry, rub the lower part of your patient's back with olive oil or mutton tallow. Tell the doctor about it, as this will cause a bed sore if not looked after promptly. If for any reason your patient cannot have cold water to drink, bathing her face and hands with cold water will be appreciated. A cold wet cloth over her forehead and aching eyes is comforting. When you do this, put a towel over the pillow to keep it quite dry.

Sometimes your patient is not able to pass urine. Try pouring water from one pitcher to another so

she may hear it. Let a faucet run where she can hear it. If that does not work satisfactorily, try pouring warm water gently over the lower part of the abdomen. If none of these things bring about the desired result, the doctor must be told at once, as it is a very bad thing for a patient to go too long without voiding urine. It is very important that this should be done regularly. Passing a catheter is something which should never be done by a person who has not been taught to use it. If your doctor wants you to do this, he will teach you. Great harm can result when it is not done carefully and cleanly, in the way that doctors call surgically clean.

A helpless patient has to be moved often. If you will try lying in one position you will see how very quickly you are tired. Lying in one position is a very easy way to start a bed sore. The pillows should be removed often, shaken, and put back under the head the other side up. Do not try to hold your patient up with one hand and shake the pillow with the other. It jars the patient and you cannot make the pillow even and smooth. Put your arm under her neck and shoulder, lift slowly and gently, and with the other hand draw out the pillow; lower her carefully, and then, standing away

from the bed, shake the pillow thoroughly, smooth it, and lay on the bed near your patient's head. Then lifting your patient as before, slide the pillow under her head. If you have them, use two pillows, then when you remove a pillow, slide in the fresh one which you have put within reach before lifting your patient. In this way the patient need be lifted but once. One pillow should be airing while the other is in use.

If the patient slides down in bed, which by the way does not mean that she is going to die, even if the neighbors do think so, place your arm under her shoulder and, with her knees drawn up, place the other arm under her thighs, then ask your patient to press on her heels. Her little bit of strength combined with a very little of yours will raise her up where you want her. If she is weak or heavy, you may have to do this two or three times as she will move very little at a time.

Turn your patient on her side (unless she must not be moved). This rests her. Reaching over your patient place your hand well under her shoulder, the one farthest from you, and the other hand under her hip, and draw gently towards you. This will turn her on her side. If she is then too near the edge of the bed, go to the other side of the

bed so you will be facing her back, and placing your hand under her shoulder, draw gently towards you, then place both hands under her hip and draw towards you. Place a pillow along her back tucking it well in at the lower edge, so that she may not roll back in an uncomfortable position. Draw up the knees and place a small pillow between them. If you have no small pillow, a larger one will not be uncomfortable. But if your patient lies on her side very much, she must have something to prevent irritating the skin on her knees. You can make a pad of cotton and a soft piece of muslin.

You may need the help of another person if your patient is very weak and cannot help herself. If so, do not discuss the patient or any other thing while you are caring for her. Be as quiet and gentle as possible. Give all needed directions to your helper before she comes into the room. Avoid quick movements, noises, and above all, do not argue about the method of procedure.

Do not allow any one in the room who is not helping to do something for the patient. Do not let them stand by the door or talk in the hall or next room. When one is very ill it is no time to satisfy morbid curiosity, and any one not directly connected with the care of the patient is an in-

truder. If your friends come in to visit your patient let them read this book while you are doing something for her, and then they will see that not someone else, but they themselves are the ones I am warning you about.

When feeding a weak patient, do it slowly, never be impatient and do not look cross if she spills things. Nine times out of ten she will be more sorry to make trouble than you are to remedy it. Very sick people should be treated not like grown-up members of society but like little children. This does not mean to talk baby talk to them or pat them on the back or the head as the unprofessional bewhiskered doctors in the moving pictures always do, but just be gentle, kind, and considerate in both movement and speech.

When your patient is ready to sit up, do not tire her with preparations for it. Put on her stockings or, if it is a man, put her stockings on him. A woman's stockings are much longer, cover the knees, and are easier to put on than underclothes. Put on her slippers, draw a large high-backed rocking chair to the head of the bed, put books or blocks under the rockers so it cannot slide or rock, put a blanket or comfortable over the chair cornerways, then with your patient's arms

around your neck and with your hands under her arms, let her slide to the chair. A stool will be needed if the bed is high. Fold the corners of the blanket, which hang over the chair arms, around her legs: the corner on the floor, fold up over her feet and pin with a large safety pin. Put a shawl or jacket around her shoulders and you have her snug and warm in a blanket envelope. Take away the blocks under the rockers and slowly draw your patient to another room, if possible; if not then to the window. Put a low chair or stool under her feet and, if she wants it, a pillow at her back. If you have been able to take your patient to the next room, open the windows in your sick room and take the bed to pieces at once. Shake the blanket and sheet, turn the mattress, and remake the bed, for your patient may be tired in a very few minutes and it must be ready the second she wants to go back. More harm than good will be done if she is over-tired. If your patient must sit in her room, take the sheets and blanket out of doors and shake them, turn the mattress, and make the bed.

If there is a comfortable cot or couch in the next room or even in her own room, it will be a pleasant change to use it part of the time, as soon as she is

well enough. This should be made like a bed, with sheets and pillows. The bed will be a haven of rest and not a place of torment when she goes back, and if given a warm drink and a hot-water bag or blanket for her feet, if needed, she will then have a nap. The first excursion in the rocking chair should not last over half an hour and may not be longer than ten minutes. Do not urge the patient to sit up, after she wants to go back in bed. Have the bed ready and advise going back before she is too tired.

When your patient is convalescing, she will no doubt enjoy having someone read to her. If you have a friend or neighbor who can do this it will give you time for other things. Be sure that she reads cheerful stories and does not tell news which would make the patient nervous or distressed.

THE SICK ROOM

The room chosen for the patient should always be as far away from the working part of the house as possible, in order that she may not be tired by unavoidable noises, the conversation of the family, or annoyed by smells of cooking. A sunny room is best, for the curtain can be drawn or the light shaded if it is too bright, while a room in which the sun never shines is not as healthful and is depressing. Do not put your patient in a small room unless absolutely necessary. If you have a large room, put your patient there, even to desecrating that holy of holies, the farmhouse or village parlor. As a rule in farmhouses and in many village houses as well, there is a bedroom opening into the parlor, known as the parlor bedroom, usually with one window, while in the parlor are always two windows, usually three, and sometimes four, besides an outside door. When a long illness is expected as in typhoid fever, or when a baby is coming, pack away the family photographs, the crayon portraits,

the center table, and always the carpet. Place a single bed well in the center of the room where the light will not shine in your patient's eyes. Have a table near the head of the bed and another for the books and sewing, which the nurse will use. The mother of the house will not be worried about her cherished possessions if they are safely put away, and if not in pain, will enjoy spending days in her parlor, which, if she is a farmer lady, will be an unusual experience. This room is not near the kitchen and will be more quiet; will save much running up and down stairs, which always has to be done if there is no bathroom. She will be able to have light, air, and quiet, three things which will aid her recovery.

There should be no heavy curtains or hangings. If anything is desired besides the shade, let it be muslin or net curtains which can be laundered. Have as little as possible to keep dusted and still have the room livable. A bare floor is best, with cotton rugs which can be washed after the patient is well, and during her sickness can be taken out of doors, shaken, and aired.

Do not sweep the bare floor but clean it with one of the many dustless mops. A piece of soft cloth, outing flannel, or old blanket put over the broom,

will do nicely. When cleaning the room, do not hit the bed or move it without telling the patient you are going to do so. Do not make any unavoidable noise or stir. If the carpet sweeper squeaks, oil it, and do not hit the bed or furniture with it. Also oil the noisy door hinge. If the shutter rattles in the wind, fasten it, or if the window rattles, put a folded card or piece of wood between the sash. Do not let the family slam doors.

The windows should be open all the time unless the patient is being bathed or is uncovered. In cold weather a good way is to raise the window about six inches and place a board across the opening. The air will enter between the two sashes of the window and cannot blow directly upon your patient. You can get a little fresh air by raising the sash until the bottom edge is level with the window sill. If the bed stands where the air strikes your patient and you have no screen, an umbrella or parasol makes a good screen and, in case of a sick child, a diversion, for all children love to play under an umbrella. A window screen covered with cheesecloth or a piece of cheesecloth tacked on the outside of the window keeps out dust, soot, or smoke and lets in fresh air.

Cold air is not always fresh air, and because a room is cold it is no sign that it does not need airing.

If possible do not use a polished table at the bedside. If there is no other one which can be used for this purpose, cover the polished one with several layers of paper, then with smooth boards the size of the table, or with window glass. If you cannot get boards or glass use cardboard (a suit or dress box unfolded will answer), then over this put a clean towel or white table-cover. When your patient is better she will not spend her convalescence bemoaning the marks and mars on her pretty table, made by medicine, hot dishes, wet clothes, or a hot-water bag which you laid down in a hurry, or a piece of soap which slipped from your hand. Everything in the room should be as good as when you begin and will be if you use a little forethought and care.

Save all paper bags from the grocery for refuse matter from the sick room, soiled absorbent cotton, pads, and dressings, pieces of cloth which have been used by a patient having a cough. This is much better than using a sputum cup, for the little pieces of cloth may be put in a bag which is always near the patient and in which they may be burned.

This saves cleaning the cup which is disagreeable and a waste of time, and protects other members of the family from any germs which the sputum might contain. A paper flour-sack is useful for carrying away the soiled bed linen and patient's clothes. It is much better than for the nurse to gather them up in her arms and whisk them downstairs through hall, dining-room, and kitchen, to the laundry or out of doors.

In case of badly soiled linen, put it in the flour sack, open the window, and drop it into the yard, then carry it to the tub. This, of course, could not be done in the city, but many sick people live in the country where the earth under their windows belongs to them.

Would you have a rattlesnake in your sick room? Decidedly not. Then why have a fly? Flies cause more deaths every year than rattlesnakes. He is an annoying thing, walking with his tickling feet over your hands and face and giving you a nip if you are off your guard. He is a nasty thing besides, carrying hundreds of disease germs on his feet from the last manure pile, garbage can, or dead thing which he walked over, and if you have typhoid or any other thing which he can carry, he will hurry away with it to your neighbors as

fast as his wings can fly with him. So swat the fly. Don't just drive him out. If one is smart enough to slip in to your sick room you be smart enough not to let him slip out again. With a folded paper, a sticky fly paper, or a wire swatter, finish his murderous career and then inter his mangled remains in the paper bag with the other refuse of the room to be cremated later and thus end that fly.

Sometimes the nurse must do the family mending or stocking darning, while sitting with her patient. The nurse should give herself all the rest and comfort possible whenever she can and should sit in an easy chair when she is able to sit at all; but do not rock and let your heels hit the floor, do not drum with your fingers on the table or the arm of the chair, do not hum under your breath. A good hearty song is much better. Do not walk on your toes or whisper, just go about in a natural way unless the patient be asleep, then keep the entire family quiet. Keep the medicines in another room and where the children cannot get at them.

Do not have too many strongly scented flowers in the room at once. Hyacinths, syringas, lilies, sweet peas, etc., which are so delightful out of doors,

are sometimes strong in the house and quite out of the question in a sick room. If your patient has many gifts of these, bring in one vase at a time. When you leave the room for something else take a vase out with you and bring back another. The patient will be pleased by the variety and your thoughtfulness. It takes very little to entertain when the horizon is limited. All flowers should be taken from the room at night and put in a cool place and should be sorted, rearranged, and given fresh water before they are again taken to the sick room.

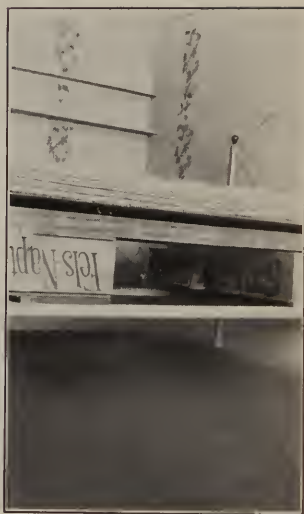
MAKING THE PATIENT'S BED

The bed in your patient's room should be a single iron one. Every house should have such a bed. It could be used in a small bedroom, or for a child if an extra one for sickness cannot be afforded. Then when an emergency arises some other provision can be made for the usual occupant. If you live in the country or village and are not able to buy one in a hurry you will no doubt be able to borrow one from some of your friends, if your illness is not contagious but is a maternity case or broken leg, for instance. I am not certain of city people. They as a rule are not on bed-borrowing terms with their neighbors, but such friendliness is not as much needed in the city where there are large clean hospitals, with wide welcoming doors always open to receive emergencies and those who cannot be well cared for at home.

Have a high bed. You will find the high bed is much easier, saving yourself many backaches,



THE BOX SECURELY TIED TO
THE BED



PLACE THE SPRINGS ON THE
BOXES AND YOU HAVE A
HIGH BED

and the doctor will rise up and call you blessed. The patient is just as comfortable, for when she is convalescent she can use a stool, hassock, or box for getting out and in bed. Any one who has visited a hospital will remember the high beds. People will always ask about them and are much interested when told that there is the same difficulty in working over a low bed that there is in working over a low kitchen table. With the low bed the tiresome bend of the back becomes agony long before the patient is bathed and in order for the day. Make a high bed this way: Take two strong boards which will reach across the frame of the bed. To each end of these nail firmly a box about twelve inches high. Soap boxes do nicely. Place one board at the head and the other at the foot of the bed with the boxes on top. Bore holes through the box corners which come next the posts of the bed, run through these a piece of clothes line and tie firmly to the posts. Lay the springs on the boxes, and over the springs spread a sheet, then put the mattress in place and make the bed. The sheet over the springs covers the boxes, and when the bed is made it looks like a hospital bed and as inviting as the bed in the picture "Ready for the Patient."

Many people recommend placing blocks under the legs of the bed to raise it, but if this is done the bed cannot be moved. It is sometimes necessary to raise the bed at the foot in case of hemorrhage after childbirth or an operation. It is very nice to be able to move the bed on the casters when cleaning, if the room is small or, as the patient begins to sit up in bed, it makes life much more interesting if she can be wheeled over by the window for a little while each day. None of these things could be done if the casters were off and the legs of the bed on blocks.

I do not know if all the feather beds have yet been made into pillows, but I hope so. They must not be used on a sick bed, even if dear to the heart of the patient. They cause bed sores, cannot be cleaned or aired, hold dampness and smells, and are altogether an abomination. If you have a patient who has used feathers try in every diplomatic way you can think of to get her to abandon them. It is hard for very old people to change their ways, but it is the feeling of being snug and warm which they like. If you put a thick comfortable or two over the mattress, with a quilted pad or a cheesecloth and cotton one under the sheet, I think you will be able to manage



READY FOR THE PATIENT



WAITING FOR BREAKFAST

without hard feelings either of the body or the mind. Try to arrange the bed without argument or friction with your patient. The smartest nurse is one who does the best thing and has her own way without the patient being conscious of it.

Put the comfortables on the bed, leaving room at the top to tuck them in tightly. They can be pulled at the foot and from each side to take out the wrinkles. This will keep the bed soft and warm for old bodies who love feathers. If they are cold, wrap the legs and feet in a flannel blanket. Never put anything in the bed which cannot be aired and laundered. If there has to be an argument about the feathers do not preen yourself and be irritating because you have gained your point. Such little things hurt the feelings of sick or old people. Let loving kindness and forbearance be your motto and always be very careful to do exactly as you would be done by.

Always have a protecting pad of some kind over the mattress, either in sickness or in health. It keeps your bed clean. The mattress will look new a long time, and in case of accident the pad is easily washed.

When making the bed for a sick person after the springs are raised to the desired height and the

mattress is in place, put on the pad or quilt, leaving enough at the head to tuck firmly under the mattress. Bed clothing under a sick person always crawls up, not down, and if the mattress cover and undersheet are firmly anchored at the head they can be pulled from the foot and sides, keeping the bed without wrinkles.

Over the mattress cover, put the bottom sheet, tucking in firmly at the top (if the sheet must be short anywhere, let it be at the foot). Tuck the sheet in on the side, not in a roll, but put it as far under the mattress as it will go. This will hold it in place. Then go to the other side of the bed and pull the sheet tightly across, tucking under the mattress as you pull. Take pains with the corners, making them like neatly done packages. Pull the sheet at the bottom to remove any wrinkles; also the pad underneath.

Nurses at one time were told to pin sheets or bed clothing in place, but that is an old idea in these days and is not now considered necessary if the bed is well made. It is not soothing for the sick housekeeper to hear her good sheets tearing three-cornered holes in themselves every time she turns over in bed, and no matter how kind her nurse has been, there will be a little hard feeling

in the housekeeper's heart every time she mends or sees these ugly three-cornered tears.

Do not feel that because you have a narrow bed you must have narrow sheets. The wide ones stay in place much better. If you have narrow sheets and wish to use them they make splendid drawsheets and can be used for a top sheet, and then if wrinkled but not soiled, for drawsheets. Always have a wide sheet for the bottom one if possible. If your patient is very ill, staying in bed all the time and therefore using a bedpan, a sheet called a drawsheet in the hospital will be necessary. Get, if you can, a piece of rubber cloth, one yard wide and a couple of yards long. Place this across the bed where the patient's hips will come. If a rubber cloth is not to be had, a table oilcloth may be used. This is not as soft but will protect the bed. Several large newspapers with a layer of cotton basted on top will do for an emergency. The rubber cloth must be washed if soiled. The paper and cotton pad burned. Never have a disagreeable odor about your patient's bed. Over the rubber sheet put the narrow sheet or a wide sheet folded hem to hem, the hems toward the foot of the bed. Tuck under the mattress as far as you can on one

side, then go to the other side of the bed and pull both rubber sheet and drawsheet tight and smooth, tucking them under the mattress firmly.

The top sheet is put on wrong side up, the wide hem at the top. Tuck it in enough at the foot to keep it from pulling up, leaving it as long as you can at the head. Then over this put the blankets or quilt. Blankets are better than quilts for they give more warmth in proportion to their weight and can be more easily washed. Tuck these in at the foot, making them six or eight inches shorter than the sheet. If you have a thin dimity counterpane it may be used, but never a heavy one. Use a sheet in place of a counterpane making it come as high as the blankets, then fold the top edge of the upper sheet back over the blankets and sheet-counterpane. This brings the hem right side out, keeps the blankets from being soiled by food or medicine and the irritating flannel from touching the face or hands. The white covering gives the bed a neat appearance. Have as many pillows, large and small, as you can get. They help so much in changing the position of the patient. These should be aired on the line or put on the piazza each morning when the patient is having her bath.

Two light blankets are always warmer than one heavy one. Blankets come in pairs and some people seem to have a horror of cutting them in two. They are very hard to use this way, heavy to wash and handle, and do not go on the bed as well as when cut. It would be about as sensible to say, "I will not cut my dish towels in yard lengths; they might be more convenient that way but they come from the store in one piece." The edge of the blankets can be finished with a binding which comes for that purpose and can be found at the notion counter in any department store. A ribbon can be used or, cheapest of all, the edge can be buttonholed or crocheted with yarn to match the color of the stripe of the blanket.

The method of changing the bed with the patient in it is told in *Baths for the Sick* (page 44).

Do not keep your patient too warm. On the other hand, do not leave arms, shoulders, and chest out in the air. When your patient is lying on her side, see that her back and shoulders are covered. If your blanket and sheets are not long enough to cover her nicely, use a little extra blanket or knitted shawl. This is liked very much if thrown across the chest when lying on the

back. The hands and arms have more freedom than when they must be under the bedclothes to keep warm. A knitted jacket or kimono, put on back to front, is nice if your patient sits up in bed, or reads. The room can be kept cooler with this simple arrangement and the patient will not mind the cool fresh air. You can also put your top blanket a little higher than the bottom one. If this becomes pulled up too high, the fact of its being on top makes it very easy to readjust.

If you have a limited supply of pillow-cases, use the fresh one each time for the pillow under the patient's head. Use the wrinkled ones for the pillows to be placed under the knees and back.

Change the sheets each morning. They may not be soiled, but if hung out of doors, well aired, and folded and used to change with the next day it will be almost as refreshing as if perfectly clean ones were used, and when the amount of laundry is an important item, this plan works very well. If the top hem of the sheet is wrinkled, turn the bottom hem to the top.

A comfortable bed has much to do with your patient's peace of mind and body.

When a patient is very ill and not able to lift herself at all, you will need the help of another

person when changing sheets or moving her. Change the sheet from the top to the bottom.

Roll loosely a clean sheet, beginning at the narrow or bottom hem and roll to within three feet of the wide hem. Remove the pillows and gently pull the sheet from under the mattress all around the bed. Roll the sheet which is on the bed toward your patient's head, then laying the roll of the clean sheet close beside the roll of the soiled one tuck the top of the clean one under the mattress, so it will not be pulled out as you draw it down under your patient. Lift the patient's head and shoulders on your hand and arm, her head on your arm and your hand under her far shoulder. Your assistant will then quickly but gently roll the soiled sheet and unroll the clean one, keeping the rolls side by side. You and your assistant will stand on opposite sides of the bed and lift the patient by putting your hands under her, rolling one sheet and unrolling the other until you have the soiled one off and the clean one in place. Trained nurses sometimes prefer folding the sheet in folds four or six inches wide, one fold on top of the other like accordion pleating, but many people are not accustomed to handle sheets as often or as deftly as a trained

nurse and rolled sheets will be easier for the amateur. You can try both ways and use whichever suits you best, but do not practice on a helpless patient.

A clean draw sheet can be rolled and put in place in the same way only from side to side. Pull out the ends of the soiled drawsheet. If the nightdress is soiled, change it and keep the fresh one up and away from the soiled sheet. Tuck the clean end of the soiled drawsheet under the patient. Bathe the patient and dry carefully. If the rubber sheet is soiled, wash it and dry thoroughly, then put the clean drawsheet in place and with your helper work the two sheets under the patient, working slowly and gently.

The nightdresses or nightshirt for very ill and helpless patients should be cut down the front and put on front side to the back. Keep a pad under the patient's hips, as this will save changing the drawsheet so often and will also save laundry. Make the pads of newspapers with a thick layer of absorbent cotton on top and a piece of old muslin or cheesecloth basted over the cotton. When the bowels move without warning the use of these pads will save the strength of the patient who is very weak and should not be moved.

These pads should be burned at once when they are soiled, and a number kept on hand, for when one is needed there will not be time to make it.

BATHS FOR THE SICK

The surface of the body is covered with little openings, and through these openings waste material is thrown off. We all know how disagreeable a well person is, if he does not bathe, and it is not the dirt which he has collected in shop or garden which makes us like to keep between him and the wind, but the refuse matter which has been discarded by his own body and to which he lovingly clings.

There is the oily matter which keeps the skin in a healthy condition and little particles of skin which are always dying and always being removed. The tiny sweat tubes carry off the waste water in the system and leave discarded, ill-smelling material on the skin. Even a well person is much healthier and far more agreeable if he takes many baths.

A sick person staying in bed all day needs bathing as much as, if not more than, a well person, who is up and working and getting plenty of fresh air.

A good bath is a tonic. It is stimulating and refreshing. I once knew a woman who objected to having a bath, saying she had been in bed for a week and therefore had no chance to get dirty. It was hard to convince her that the dirt I wanted to remove was that which came from her own body, and not from other sources. She was so much more comfortable after it was over that there was no objection to the second bath.

Do not try to bathe your patient in a china bowl. The water becomes soapy and cold quickly. If you cannot have a tin foot-tub, use a new dish pan. One can usually be bought at the ten-cent store; not very good tin, to be sure, but good enough for your purpose. You can then have a quantity of hot water, and the tin tub or pan with handles is easier to carry. Some people may object to being bathed in a dish pan but it holds the water just as well and the difference is only in shape. Just tell your patient it is a new fashion in tubs.

When it is time for your patient's bath (which should be given every morning, not sooner than one hour after she has had her breakfast) carry everything you will need to her room, with the exception of the hot water, before getting your patient ready. A tray or common market basket

will save many steps. In the market basket have two towels, a soft one for the face and ears, and a bath towel, two wash cloths, a face cloth and a crash one for the body, a piece of soap (Ivory is better than cheap scented kinds), a whisk broom for brushing the sheets, a bottle of alcohol, a tin of talcum powder, comb and brush, scissors and nail file, and, if you like, a bottle of toilet water. Every little dainty thing which is done for your patient adds to the general feeling of comfort and contentment, and sometimes a few drops of lavender water makes a plain bath a luxurious performance. Place a table or chair near the bed to hold your bath pan, get clean sheets and pillow-cases, if they are needed, and fresh nightdress; put these to air. Then get the patient ready. Roll a blanket; begin at the edge and roll toward the center with the roll going lengthwise of the blanket, roll until half of the blanket is left, then with your patient on her side, lay the roll tightly along her back. Turn the patient on her other side and this will bring her over on the blanket. Then unroll the blanket and cover the patient. With your patient on her back and well covered, remove the nightdress. Pull it up from the bottom, the patient lifting



MAKE THE TRAY AS ATTRACTIVE AS POSSIBLE

[Page 57]



THE WAY TO ROLL A BLANKET OR SHEET

herself by pressing on her heels; work it up until you have the hem of the nightdress under her neck, then pull it off over her head, one sleeve at a time, covering with the blanket as you uncover with the nightdress. Leave your patient tucked snugly in the blanket while you go for the hot water. Start with a small amount of warm water for face and ears—then add a little from time to time from a pail or pitcher of hot water which you brought in with the tub. Bathe a small space and dry well before bathing more—an arm at a time, then the chest, abdomen, back, and legs. Dry carefully. When you come to the feet, have the water warm and plenty of it. Put the bath pan on the bed so the patient may be able to put her feet in it. There are two great things in the world, being in love is one, and the sick person who is able to put her feet in the water can tell you what the other is. If you doubt me, try it on someone who has been in bed for days without a bath.

Wipe dry between the toes and, if needed, cut the nails and file sharp edges. Dust with talcum powder under the arms, between the thighs and toes, and under the knees. It is also refreshing to have an alcohol rub, but if there is not time,

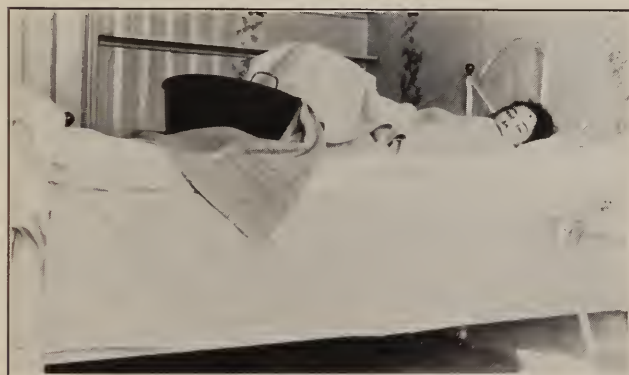
leave this until the patient is prepared for the night.

After the bath is finished, turn your patient on one side. If the sheets need to be changed, do it at this time. Roll the soiled sheets close to the patient, then roll the clean ones and put in place as you did the bath blanket when you began the bath. Turn your patient and you have her lying on the clean sheets with the soiled ones behind her. These can easily be removed and the fresh ones tucked in. Always be careful to get the sheet where it must stay; enough to tuck in at the top and not too much at either side. Lay a blanket over your patient, then remove the bath blanket and put on a clean nightgown. This does not leave your patient uncovered or exposed to cold at any time. Then over this blanket spread a sheet and another blanket, and pull out the blanket next the patient, which can be put on top. Finish making the bed as directed, making everything under the patient absolutely without wrinkles and everything on top straight and trim. Take an artistic pride in making the bed look well.

If the patient is very ill, and cannot be turned, place a bath towel or small blanket under the



READY FOR THE BATH



WITH HER FEET IN THE BATH PAN

parts to be bathed and with another blanket over her, bathe carefully. Do not wet the bed or nightclothes. Never have wet spots on the sheets or nightgown. Dry the creases well and use powder. Dry by laying a towel over the patient and rubbing on towel, not rubbing the towel on the patient, in that way irritating tender skin.

After the patient is comfortable and tidy, remove the things you used for the bath. If the sheets are not soiled, hang them out in the sun and wind; then fold them nicely and they can be put back the next day and will feel fresh and sweet. It is more comforting to your patient to change the sheets this way than to leave them on until they are actually soiled. When bathing your patient do not wet the bath blanket. Wash the wash-cloths and dry out of doors, also dry the bath blanket if it is damp and if you must be very careful about the amount of linen you use, wash the towels also, snap out the wrinkles, and hang out of doors. These need not be ironed. When perfectly dry, fold and put in your basket for use next day. Use one nightdress for day time and another at night. Men are not supposed to be vain, but we all know women are and I once heard

a doctor say, "I always know that a woman is better when she begins to take interest in her personal appearance." Save the dainty nightie with the pink bow until after the bath. Part the "sick-a-bed" lady's hair in the middle from her forehead to the nape of her neck and braid back of each ear. Don't let the braids be lumpy or hard next to the head, as they are uncomfortable to lie upon. Let her hair be soft and loose around her face and if you can get them, tie a pink bow on each braid. Keep her finger nails nice and give her a clean handkerchief with a drop of toilet water on it. Do all this if possible before the doctor comes. She will be pleased (as she is a woman and vain) to have the doctor see her at her best. The doctor will like it also. I have never seen a man whom I thought did not like to look nicely, to have his hair brushed, to be shaved, and have his nails cared for, or even the drop of lavender on his handkerchief. But they were no doubt concealing their real feelings (being men and not vain), and were enduring the "fixing up" just to please me.

Baths are used many times for medicinal purposes as well as for cleanliness.

A salt bath is stimulating and refreshing. A

hot mustard foot bath is helpful to relieve headache. A cold spinal bath or douche is often recommended for aching nerves. A soda bath soothes an itching skin and a cooling bath reduces fever temperature.

SALT BATH

In the hospital where everything is convenient and all needed supplies can be had at a moment's notice, things can be done quite differently than at home where one must use the things at hand. And while in the hospital, the patient having a salt bath is rubbed with salt and sprayed, there is a very good substitute and one which can be easily managed at home. Put the patient in a bath blanket as for a cleansing bath. Put a tea-cupful of salt in a wash basin half full of cool water and with a large crash wash cloth wrung out of this, rub your patient briskly over her entire body, making the skin red, but not sore. Then with a clean cloth and fresh water wash away the salt and dry gently.

MUSTARD BATH

The hot mustard foot-bath is made by adding one tablespoon of mustard to four quarts of

water. Mix the mustard with a little cold water and add this to the warm water in the foot tub. The mustard mixes better with cold water than with hot and with a small quantity than with a tub half full. Hot water must not be used for mixing it (for too much heat destroys the virtue of the mustard). As the water cools, a little more hot water may be added. When pouring warm water into the tub in which your patient's feet are soaking always put your hand in the water between the feet and the place where you pour. You will be able to tell just how hot you are making it, and then will not burn your patient by pouring hot water on her feet. Dry the feet carefully and if the bed is cold, wrap them in a warm blanket.

SPINAL BATH OR DOUCHE

If your patient is able to go into the bathroom, fold a bath towel on the edge of the tub, and with a kimono or wrapper put on back to front, let her sit on the towel outside of the tub. Put something under her feet if they do not touch the floor, then with a little hose attached to the cold water faucet or with cold water in a pitcher, pour it

down her back, keeping over the spine. Begin at the back of the neck. You need not wet her hair or clothing if you do this carefully, and I advise you to close the door and windows even in summer, for she will howl the first few times it is done. I knew of one woman who would not do this for her daughter even when ordered by the doctor and with the daughter anxious to have it done. She said it was heathenish and cruel, but it is the *idea* of cold water which frightens people, and any one with aching nerves in their back is very much relieved by the cooling bath. It removes the inflammation and makes one feel as if they had a new back.

SODA BATH

A soda bath is used for extreme itching of the skin, as in heat rash or hives. You will probably have a pound box of baking soda in the pantry. Add a quarter of this box to two quarts of cold water. Dip a heavy wash cloth in this and bathe and pat the body gently. Do not dry with a towel, but let it evaporate. If the body is well covered with the rash you will need more water and more soda. The hands, which are usually so painful in hives, may be held in the water a few minutes.

BATH FOR REDUCING TEMPERATURE

A bath for reducing temperature is often needed in typhoid and in other fevers, or in heat prostration or sunstroke. If you have a rubber cloth, cover it with a sheet and put under the patient, or if there is no rubber cloth use the woolen bath blanket with the cotton sheet over it. The woolen sheet will keep the bed from becoming damp. Put a piece of ice in a bowl or wash basin, and pour over it water and alcohol, half and half. Remove the patient's nightdress, spread a towel over her thighs, and put a cold wet cloth on her head. Remove the top sheet. A fever patient who must have temperature-reducing baths should have no covering but a sheet. Dip a wash cloth in the alcohol and water, squeeze just enough to prevent dripping and wetting the bed-clothing, and sponge gently over the patient's body. Let the alcohol and water evaporate. Do this two or three times and then, after she becomes accustomed to the cold water, with a large palm leaf fan, fan her to make the evaporation quicker. This can be done for fifteen minutes at a time. Turn the patient on her side if the doctor allows her to be moved, and her back and

hips can be wet and fanned dry in the same way. This is the easiest way for a patient to have a cooling bath and the least trouble for a nurse who is working at home, as so few things are required and one person can manage it all.

THE TRAY

When the patient is ready for breakfast, if she is able to sit up in bed, with two or three pillows at her back and a pillow under her knees, give her a table made from a box, and a newspaper or magazine, to read. The time will not seem as long while she is waiting for breakfast.

When preparing your patient's tray do not take a great quantity of food at once. It is better to go for more than to have her appetite taken away by the sight of too much. Be sure your patient eats. If she is weak or tired or seems indifferent, feed her yourself. Put a large napkin or towel well up under her chin in order that crumbs may not get in the neck of her nightdress. Give her her meals regularly but not too much at a time. If the patient is on full diet, give three meals and nourishment between. The diet is always ordered by the doctor, and if he is willing, you can vary it by giving between meals, milk, eggnog, broth, malted milk, gruels of different kinds, egg lemonade, a

custard, ice cream if you know how and where it is made, cocoa, or buttermilk.

If only half a glass of milk is taken, do not leave it in the sick room for the next time but put it in a clean glass and set in a cool place until it is needed. Alternate the nourishment in order that your patient may not become tired of one thing. Give plenty of fresh drinking water or, if she is feverish, give her a glass of cold lemonade if she has not had calomel. She may not know that she wants it but will be delighted when you give it to her. A cup of hot tea or coffee is stimulating and very refreshing, especially if unexpected.

Make the tray attractive. Use your finest china and silver. Keep the tray cloth and napkins immaculate, and while her diet may be restricted to one slice of toast and a cup of coffee or a glass of hot milk, make the serving of it a ceremony. If possible put a flower on the tray, an autumn leaf in the fall or a pussy willow in the spring. When I had no flower I sometimes used clippings from the newspapers—some funny little verse or joke. These things are diversions and count for much more to a patient than any one knows who has not tried them.

Try and arrange to give your patient her break-

fast after the family have eaten, if the family breakfast is an early one, but if the others are late risers, it would be best to give the patient her meal first. Do not keep her waiting if it can be avoided. Give the noon meal first, also the night meal. Then nothing which comes up or no one who comes in will delay you. It tires and does more harm to a patient to lie and wait and wonder if she is entirely forgotten, than to go hungry. Waiting is hard for strong people and doubly so for weak ones.

A sick person usually likes less sugar and more salt than when well but do not over-season food. The safest way is to season lightly and put a salt shaker on the tray.

If your patient may have oranges, take the juice out with a glass lemon-squeezer and serve in a glass. In summer add a small piece of ice or put on the ice before serving. This is dainty and much easier for the patient than eating it with a spoon or in the fingers and saves soiling the bed or nightgown.

If your patient must be fed, do it slowly with a teaspoon or fork, giving a very small quantity at a time. Do not hurry her. If she has liquid diet and cannot eat from a spoon, you can buy at

the drug store, the china store, or even the ten-cent store, a feeding cup with a little spout through which the patient can drink. Some people like a glass drinking tube. If you live miles in the country, you may not be able to get these conveniences, so you must use something else. Do you remember, you country people, when you were quite young, how you greeted with enthusiasm the barrel of sweet cider which was brought home each fall? Do you remember the little hole in the side of the barrel called the bung-hole and how you and the other small girls and boys spliced together long straws which you found in the big barn? Put them in the bung hole and sucked the cider through them? Well, you can apply this very thing to your sick people. The clean straws are splendid things to help in drinking milk, thin gruel, broth, orange juice, or any liquid which the patient must take. If medicines containing iron are taken in this manner it will be much better for the teeth.

When your patient can eat from a tray, make the meals dainty and attractive, for the eye must be pleased as well as the appetite. Get the tray ready before you prepare the hot food, then nothing will be cold. When you make toast do

not use new bread and toast it quickly on each side but use old bread, toasting slowly and turning frequently. Then you will have toast, not a slice of bread seared on the outside and soggy in the middle. Do not give your patient coffee with half of it spilled in the saucer; it is not appetizing and the coffee drips from the bottom of the cup, soiling the tray cloth and the bed linen. The best way is to carry tea or coffee to the sick room in a little pot or a cream pitcher. Warm the pot, or cream pitcher, and the cup by pouring hot water in them, then they will not chill the tea or coffee.

Use a spoon with holes, or a skimmer, to take a poached egg out of the water, when it is to be served on toast. Then your toast will not have to act as a sponge to take up the water. Always have everything which should be hot, very hot, and cold things, very cold. Put hot food on hot plates and cover with a hot bowl.

First get the patient ready for the tray, then the tray ready for the food, then cook the food and it will be hot and appetizing.

PREPARING THE PATIENT FOR THE NIGHT

The rest of the patient is more important at night than during the day, and if her bed is well made and comfortable, it will be a great help in securing healing and refreshing sleep. So from a selfish standpoint, it is better to spend a half-hour in making her absolutely comfortable before going to bed.

A sick person should have no company during the evening, as it is more than likely to stir up her nerves and make her sleepless.

If you sleep on a cot or couch in your patient's room, get this ready for yourself before preparing your patient for sleep. Then nothing need disturb her after she is once quiet.

Take out all flowers, change her nightdress, give her the bedpan, and wash her hands and face and between her thighs. Dry carefully and powder. Clean her teeth, comb and braid her hair if she is not too tired. Rub her back, especi-

ally the small of the back and her shoulders and buttocks with alcohol, for these are the places which get so tired and where bed sores come. If you have time and strength rub her arms and legs also with alcohol. You need not use pure alcohol, use alcohol and water, half and half. If you have no alcohol, use vinegar and water. Do not drag a cold hand up and down her back in a listless manner, as one patient said, "like a dead fish," but place the palm of your hand firmly on her back, or the back of her neck, and move the flesh gently without raising your hand. This massages the muscles. Do this the entire length of the spine, wetting your hands occasionally with alcohol. If the alcohol is cold, set the bottle in a basin of hot water before using.

Talcum powder may be dusted on the back and finish the rubbing with long strokes. Do not do this in a hurry, and always rub down, not up. This will often induce sleep without the aid of drugs.

Brush the sheets and draw them tight and smooth. See that her feet are warm and her pillow comfortable. Give her a handkerchief and shade the light. Cover the patient with an extra blanket, open all the windows, and air the

room thoroughly. Fix the windows as you want them for the night, and when the room is warm enough, remove the extra blanket. Fold this over the foot of the bed for use very early in the morning, as the patient will need more covering at that time.

Everyone should keep quiet and if possible you should undress in another room. Come in and go to bed without talking to her. Nothing should disturb her after she is once ready for sleep.

If the patient has trouble in going to sleep, you may give her a glass of hot milk with a pinch of salt in it, a cup of hot broth, malted milk, hot lemonade and a cracker, or a cup of cocoa, and a hot-water bag at her feet. Sometimes, just being snug and warm will make her sleepy, or if your patient can go in the bathroom, try a warm bath. A sick person should not be left alone in a bath tub. If you take your patient to the bathroom, see that everything you will need is there before taking her in. Do not leave her until she is dried and in bed. A person who has been ill is quite liable to faint or fall, and if such a thing happens you will be glad that you are on hand.

Continued deep breathing of fresh air will often put one to sleep. Ask your patient to count

the times she breathes deeply and see how many times she can do it. She may be asleep before she finishes counting.

A turned-down lamp or gas jet is not a good thing. It spoils the air. Have a tiny lamp if you need a light at night. If you do not have electric light, a candle is useful, for it can be lighted quickly. You should keep this, with a box of safety matches, near your bed. If a lamp or a bright light is used, it must always be shaded.

A very sick patient should not be left alone nor should the nurse sleep at night. Sudden changes during an illness often take place during the night. If your patient has been delirious, she may get out of bed at this time. If she does not sleep well the doctor should know it. Write it on your record, just how much or how little she has slept.

A RECORD FOR THE DOCTOR

Do not keep the medicines in the sick room or where the children can reach them. Many times sick people think if a small dose is good, a large one will be better, or a despondent patient might get the idea that it would be a clever thing to take all the strychnine tablets at once and end the story. I know you would like your story to be a continued one and not end in that abrupt and distressing manner. Little children will eat any bright-colored pill or tablet or drink anything which tastes sweet. Many grown-ups have been fascinated by the sight of little bottles of pink, red, brown, purple, and yellow tablets in the doctor's bag and how much more fascinating would they be to a little child. So these things must be put where the children cannot see them and where the sick person cannot reach them.

If the doctor orders medicine to be given before meals it should be given one half-hour before.

Those to be given after meals one half-hour after.

If the doctor leaves three kinds of medicine to be given, for example, pink tablets four times a day, white tablets before meals, and a liquid every two hours, have the doctor write the directions for you or write it yourself while he is still there, so you may make no mistakes. Then take a piece of paper and mark it like this:

White tablet—before meals.

Pink tablet—8—12—4—8, etc.

Liquid medicine—6—8—10—12—2—4—6, etc.

Then as you give the medicine, cross off the time on the paper, and there will be no argument as to the time of the next dose.

Sometimes the doctor will leave two glasses of liquid medicine to be given alternately every hour. Cut two five-inch squares of cardboard and on one write the odd hours 7—9—11—1—3—5 and on the other 6—8—10—12—2—4—6. Place a card on top of each glass. This serves as a cover as well as avoiding confusion.

In case the medicine is to be given every fifteen minutes or half-hour it would take a great amount of writing and crossing off, so if you are to give first one and then the other, lay the spoon on

top of the one you are to give next. Give your patient a swallow of water both before and after the medicine, if it is unpleasant to take.

Powders may be given dry on the tongue. Give a swallow of water first and then making a little trough of the powder paper, pour the powder on the tongue, and give a drink of water. If you and the patient are careful this will avoid distributing unpleasant medicine around the teeth and under the tongue. If the powder is bitter, a little sugar will often dispel the bitter taste.

When the bowels must be made to move quickly, a medicine called a purgative is given. This may be Seidlitz powder, Pluto water, salts, etc., and is given early in the morning before breakfast.

A gentle medicine for moving the bowels is called a laxative or cathartic and is usually given at night, as it does not disturb the patient's sleep.

There are several ways of giving medicine: by mouth, by inhaling, by rectum, and with a hypodermic syringe. When a patient is to inhale the medicine it is added to hot water, then the patient breathes the steam into his nose and throat.

When medicine is given in the bowel it is injected in the rectum by means of a syringe or

rubber tube. Nourishment is also given this way when it cannot be retained in the stomach.

Medicine is also given by means of a hypodermic syringe. These methods are taught to the nurses in the hospitals, but a hypodermic syringe would not be used by an untrained nurse unless she could be taught by a trained nurse or a doctor.

A suppository is a cone-shaped piece of cocoa-butter containing medicine and which can be absorbed by the bowel. The suppository should be covered by oil or vaseline. Oil the first finger and with it push the suppository gently into the rectum the length of your finger. The finger nail should not be sharp to avoid hurting in the least the delicate lining of the bowel. The bowel should be empty when the suppository is given.

In the hospital a sheet of ruled paper called a chart is used. On this a record of all things pertaining to the patient is kept. Treatment, medicine, and food, each has a column by itself, and another column headed "remarks" is used in which the nurse writes a report of special symptoms, complaints of pain, or anything she thinks the doctor should know. If the doctor wishes you to take the temperature and pulse of the patient, he can easily teach you how to do it, if

patient that the real errand was not to order her coffin.

Notice how the patient sleeps, if quiet or restless. Write this, and the length of time she sleeps, on the chart, and then when she gravely assures the doctor that she did not sleep a wink all night, you will not have to contradict her and make yourself disagreeable, but can tell the doctor all he wants to know by handing him the chart.

This chart is the property of the nurse and the doctor. It is not for the patient to read or for the entertainment of the neighbors. The patient should not be told what medicine she is taking nor what her pulse and temperature are. If she asks what her temperature is some such reply as this can be made, "fine and dandy," etc., but not in a way to irritate her. Some people get very much alarmed about themselves when sick, and if they knew they had one degree of fever, would promptly worry themselves up to two degrees.

Record on your chart if your patient is sick at the stomach, or vomits; tell what the vomited fluid looked like, if it was yellow, black, or stringy, how it smelled, or any other unusual thing about it.

If the patient has a cough, tell what kind of a cough, if it was hoarse or sharp and if the patient coughs during the day or night. If there is sputum raised by the cough, tell what it looks like.

Notice if the patient lies in an unusual position, with more pillows than usual or always on one side. Notice if she lies with her knees drawn up.

A patient with asthma or heart trouble will like plenty of pillows. One with an affected lung will lie on one side in order to get all the air possible for the other lung, and one with pains in the abdomen will be more comfortable with the knees raised.

All these things which may not seem important to you until you begin to observe and record them on a well-kept chart will be of great help to the doctor.

If the patient complains of pain, ask where it is; have her put her hand on the spot. I knew a dear little man of four years who gravely informed the surgeon, who had come to operate on him, that he had a toothache in his side. His only aches before had been toothaches and when the pain began, he called it that. It was a couple of days before the family discovered that the toothache was located in his appendix.

A young boy in the hospital complained continually of a pain in his chest. After a time the doctor discovered the pain was in the patient's abdomen. The poor child did not know the word abdomen and did not think it polite to tell the nurse that the pain was in his belly. If the nurse had only asked him to put his hand on the pain he could have been relieved earlier.

It is very hard to teach by book how to take the pulse and temperature, but any one can be taught in a few minutes by their doctor. It is the thing everyone should know, especially if there are small children in the family.

The color of bowel movement may be due to disease or medicine, so any unusual color or smell should be recorded on the chart. The urine should be measured and the color and amount recorded. In case it is unusual in quantity or color, it should be put in a covered dish and kept for the doctor's examination.

Hysterical people often complain of pain, and moan when sympathetic people are in the room, or when sure of sympathy from any source, but will lie perfectly quiet when alone. Sometimes such people can be observed by looking through the crack in the door. If such symptoms are

noticed, make a note of this on the chart. However, one might better err on the side of too much sympathy than not enough. The doctor will advise, and if he advises a hard heart and discipline, remember it will be your fault if you do not have stamina enough to carry out his directions and your patient does not improve.

Many times a sick person will be stimulated by the visit of the doctor or some other person. She will sit up in bed, talk, and laugh and then as soon as the doctor or visitor has gone, will be weak, tired, and in perspiration. This should be told also, as many times the doctor will think the patient stronger than she really is.

If you have had a trained nurse for a week only and are then going to care for the patient yourself, she will give you explicit instructions how it should be done; how to take temperature and pulse; how to give an enema or douche. She will tell you about food and medicine, how to make the bed, how to give a bath and will help you in every way she can. If there are many directions to follow, write them down, for it is very easy to forget strange words and unaccustomed things.

THE MEDICINE CLOSET

Every well-regulated house should have a medicine closet. This should not be full of drugs to be given indiscriminately to all members of the family, but should contain things which will help to keep them well, for example, soft old muslin to cover their burns, and bandages for little fingers practicing with the first pocket knife and which are brought to mother with bleeding cuts. Some things will not be needed until you really have a sick person in the family. Few people ever buy a bedpan in time of health, but if you can do so and live in the country it is as wise to prepare for sickness in time of health as to prepare for war in time of peace.

As medical supplies are usually very expensive take great care of them.

The little white medicine cupboards which you can buy at the furniture or department stores are very expensive and not half large enough to hold all the things which should be kept there.

They are very fascinating little cupboards, with cunning shelves and a mirror on the door, but they would serve much better as a china closet for a doll's tea set than to hold the necessary articles which should be in a grown-up family medicine closet.

If you cannot have a good-sized medicine closet made by a carpenter, you can make one yourself from a box which you can get at the grocery. If you live in the city you will probably pay a few cents for a box. In the country or village it will be given to you. Get two boxes while you are about it and use one to make shelves for the other. The top of the box will make the door. Look over the boxes yourself and select one which is smooth and strong and which, if stood on end, would make a cupboard to fit the place in your house where it must hang, for it must be up on the wall where the door fastener is out of the reach of little hands.

Buy a tin of white paint, a pair of hinges, and a hook or door fastener. These last three articles you will be able to buy in the ten-cent store. Paint your cupboard outside and in, two or three coats. When you put in the shelves, make one compartment high enough for tall bottles or quart fruit jars.

A person who is constipated is not sick in the beginning. He may need only exercise or relaxing food. But he will be sick if not attended to promptly, and therefore it is a wise thing to have a cathartic in the house and other simple remedies which a mother can use.

Many times children will need attention, and if the doctor is miles away, the mother should be able to take their temperature and telephone or send a note to him. If you cannot telephone, always write the doctor, for people carrying messages are likely to forget; even those with the kindest hearts and very best intentions.

If you are a farmer and have no telephone, probably the neighbors on the next farm will have one, and kind-hearted country people are always willing to help in case of sickness or accident. When you call the doctor to tell him about the baby, half of the other farmers along the line will be hearing you also and many times will offer advice and assistance.

If you are able to tell the doctor the child's temperature and other symptoms, he may not have to come to see her but can tell you what to do. This will save him a long ride in the country and you a doctor's bill. Still in these days of

automobiles, the doctors do not mind the long rides as much as they did years ago, when they must come in from a hard trip over muddy rough roads, change horses, snatch a bite to eat, and drive away again, through the heat of summer or the cold of winter. Now he can fly from one patient to another without thinking of his tired horse and occasionally have time to rest a bit himself and get acquainted with his family.

All bottles of medicine, powders, or anything of this kind which you have, should be kept in the medicine closet. Not a bottle of peppermint on a shelf in the kitchen, a roll of bandage in one place, and the hot-water bag in another; put all of these things back in their cupboard as quickly as you have finished with them. Then when they are needed, you will know where they are and need not hunt all over the house for things which should be in one place. You would think a woman a very queer housekeeper, who is not able to find her teapot or who would say, "I did not iron this week because I could not find my flatirons." It is just as shiftless not to know where the liniment bottle and cough medicine are to be found.

When you buy liquids at the drug store, ask the

druggist to put them in bottles which are of the same size and shape. These look so much neater, set in a row, than bottles of all shapes and sizes. This applies to the medicines which are for general family use and not to some special medicine put up for one member and which will be thrown away when its usefulness is past. When a bottle is empty, have it filled the first time you go to town, then in case of sickness or accident, you will not have to borrow of the neighbors or have someone wait while you go to the store.

Unnecessary bottles and boxes will accumulate in a medicine closet as well as in other places. These should be discarded and the closet cleaned as regularly as you clean your pantry.

It should be a rule of the house that the children must not go to this closet; then no heart-breaking accidents will occur.

If you must have poisons, they should be in bottles with a rough surface, should be labeled "poison," and kept always on the top shelf of the closet. The closet should hang on the wall opposite or near a window and where a light can shine into it at night. If this is not possible, have in the closet a candlestick with a candle always in it and a box of safety matches. These things

must never be taken away from the closet, and the candle must always be lighted when looking for medicine at night. Keep the candlestick, always in the same place in the cupboard, so that there may be no delay in finding it, and that you may be able to "put your hand on it in the dark" but LET THAT BE THE ONLY THING THAT YOU DO PUT YOUR HAND ON IN THE DARK.

If the attic and the vegetable cellar are unlighted, have another candle for these places. If the medicine closet candle is borrowed it will probably be left in the attic or the cellar and always on the night when you need it quickly.

When giving liquid medicine from a bottle, always shake it, and keep the labeled side of the bottle on top when pouring the medicine. This prevents the medicine from running down the side and spoiling the label. Never have bottles, boxes, or packages in your medicine closet which are not plainly marked, and after a medicine has been discontinued, destroy what is left. If the bottle is a good one for your closet, wash and boil it, for it may be useful.

Treat poisons as you would snakes and keep them away from the family as carefully. Never keep rat poison, fly poison, or anything which is

not a medicine in this closet, and do not have poison at all unless absolutely necessary.

Do not give anything but the simplest remedies without the doctor's orders. It is not wise to take many drugs. Keep well by obeying the simple laws of health; then you will need very little medicine. When you give medicine, be sure you know exactly why you are giving it, how much to give, and how often.

Pills which have been kept in the house a long time become hard and will not dissolve in the stomach and intestines. Some patients have been given pill after pill with no result, only to learn that the pills were so old and hard that they were like stones. When you have your doubts as to the age and usefulness of a box of pills put one on the floor and stand on it. If it crushes under your foot it is safe to give them, if not they are beyond their usefulness.

Your medicine closet should contain:

NO PATENT MEDICINES.

A tin douche pan.

A fountain syringe.

A hot-water bag—(if you must be economical do not get the hot-water bag but use a Mason fruit jar).

A clinical thermometer—(Hicks is the best).

Castor oil—(cathartic).

Cascara sagrada—(cathartic)—(children take this easily and it is good for constant use).

Rochelle salts—(cathartic).

Seidlitz powders—(cathartic).

Jamaica ginger.

Essence of peppermint.

Cathartic pills from the doctor (if you like)—
given as he directs.

Boracic acid.

Sweet oil.

Vaseline.

Mustard.

Lime water.

Absorbent cotton.

Old muslin.

Scissors.

Bandages and small safety pins.

Oxide of zinc or some other good ointment.

Castile soap.

Adhesive plaster.

Cold cream.

Talcum powder.

Bottle of alcohol.

Brandy or sherry.

Smelling salts or camphor.

Wooden toothpicks.

A teaspoon and a small glass, or a measuring glass from the drug store.

A tumbler.

A quart bottle of sterilized water.

A bottle of boracic acid solution.

Dressing forceps.

Small tray.

Baking soda.

One patent medicine, which is widely advertised to give health, youth, beauty, and almost anything else you would like, is being sold, I hear, in towns where "no license" is the law. If the person who is deprived of a saloon can get cheer and comfort from the alcohol which this patent medicine contains, it certainly would not be the thing you would wish to give your family. The soothing syrup which drugs the little babies, befuddling their little brains and ruining their little bodies, has been exposed many times and dwelt upon at length by doctors and sanitary workers. No woman in these days, who can read, would give her baby any of these ghastly mixtures.

There are many remedies, tablets, pills, ointments, and liniments which are put up by reliable

chemists and which are given by doctors, but these drugs always have their contents plainly printed on the label or wrapper and do not claim to cure everything from a sore throat to an ingrowing toe-nail. It is the quack cure-all patent medicine which you must shun and not the tablets and pills which are put up in this form for convenience. Sometimes these tablets contain three or four healing drugs and are chocolate or sugar coated. They are much easier to swallow and much more convenient than the old-fashioned way of having several bottles or glasses and giving doses of some vile tasting concoction. The little patient does not dread the doctor in these days, for now we do not hold his nose and make him take his medicine whether he will or no, but we give him a pretty pink or yellow tablet and a glass of water with which to wash it down, and it is swallowed without struggling or tears. We feel it is much better for the child, and we know it is much easier for the mother.

Buy a thermometer and take it to your doctor for instructions, or if you know a trained nurse, she will teach you how to use it. A tin douche pan is much better for family use than a china bedpan, for it can be used in place of the bedpan

and for other things as well. When one has taken a powerful cathartic, the bowels move very freely and with much gas, many times soiling the bed if a small pan is used. The large pan saves all this and is not as easily broken.

A fountain syringe is a very necessary article of furniture and is much more important in a home than a gilded chair or lace curtains. Do not buy the chair, but have plain curtains, and do have the fountain syringe. You can buy one at the drug store which will hold from two to four quarts. This has several hard rubber tips and if well cared for will last a long time. I have even seen them in the five and ten-cent store. The little bag held about a quart. This cost ten cents. Ten cents more for the rubber tubing, ten cents for the fixture to control the flow, and ten cents, for each hard rubber tip, makes the cost of the fountain syringe fifty cents. I cannot answer for this rubber or the length of time it will last. Cheap rubber things are very apt to die young, and it pays in the end to buy the best material.

A hot-water bag is a comforting thing to have and sometimes a necessity. If you can buy but one rubber article, let it be the syringe, and use a quart fruit jar in the place of the hot-water

bag. Sometimes the rubber bags are a combination (hot-water bag and fountain syringe), but in this case if more water is needed in giving an enema or douche it would have to be opened and the process started all over again. Should you use the fruit jar, keep a new one with two or three can rubbers in your medicine closet. Nothing is quite so aggravating as having a leaky hot-water bag or bottle, for it causes much unnecessary work. Shake it well before taking it to your patient to be sure it does not leak. The little flannel or outing flannel cover which belongs on your hot-water bag should be kept hanging near it.

Castor oil never used to be greeted with smiles unless the joke was on someone else and even then it took a very hard hearted person to see the joke. No one minds it very much now, for we have left behind us the idea that because a thing was hard to do it must be good for us, especially if someone else were doing it. We exercise our muscles to strengthen our bodies and do many hard and unpleasant things which strengthen our will power but we will take castor oil in the new way.

First you need a small glass. Pour a little

sherry or lemon juice in the glass, being sure that the sides and edges of the glass are all touched by it. Next put the castor oil in a tablespoon and then carefully pour it from the spoon into the very middle of the little glass. Do not let one drop touch the edges or sides. Then put a little more sherry or lemon on top of the oil to be swallowed whole as if it were a raw oyster. A little more lemon or sherry or some coffee may be taken afterwards. Holding a piece of ice in the mouth before taking, chills the mouth and the sense of taste is not so acute.

Boracic acid should be made into a solution for bathing tired or inflamed eyes and can be used as a gargle or mouth wash. This is used very often if there is a baby in the family. To make this solution, first boil a clean quart bottle or glass fruit jar; boil the cork or jar cover and rubber and a tin funnel, then in another clean basin, boil one quart of water. While still very hot, add two tablespoonfuls of boracic acid. Place your boiled bottle on the table and put the boiled funnel in the top. Then put a piece of sterilized absorbent cotton in the funnel. Wash your hands carefully before handling the cotton and do not touch anything before you touch

the cotton. When the boracic acid is all dissolved, pour it into the bottle through the cotton. Put the boiled cork in place, label "boracic acid solution," and put into your medicine closet.

Sweet oil or olive oil is useful for dressing burns and for many other purposes. If you use olive oil for salad, do not depend upon the table oil for emergencies but always have a bottle for the medicine closet.

When absorbent cotton comes from the drug store it is wrapped and sealed in strong blue paper. The cotton is sterilized in the factory, everything being absolutely clean. In the Johnston & Johnston factory at New Brunswick, New Jersey, the women who handle the supplies wear clean cotton dresses, and caps to cover their hair. They scrub their hands before handling the supplies. They are as clean as trained nurses and work as carefully as if in a hospital. The bandages, cotton, and other surgical supplies are sterilized and are carried by wonderful machinery and wrapped and rolled in a clean and wonderful manner. In a hospital operating room the cotton is made into convenient forms for the surgeons' use and must be handled; therefore it must be sterilized again and kept in sealed jars. The

cotton which you buy at the drug store is clean, and if the package is unbroken is sterile enough for ordinary use. If you handle it carefully it will stay clean. Buy only a small roll of cotton at a time. Boil a quart jar with the cover, break the outer covering of the cotton, and then, without touching the cotton with your hands but holding it by the paper, put it in the fruit jar and screw on the cover. Always keep this covered. When you need pieces for washing eyes or dressing a cut or burn, you can pull it out easily by means of the dressing forceps. The forceps must be absolutely clean when put into the jar. Take out only what you want to use. If you need to use large pieces for pads or anything which does not come in contact with a raw surface of the body, use the large roll. Always keep this well rolled and away from dust. Be as clean and as careful as possible when making any dressing. Surgeons when making dressings are very, very, very, particular about washing their hands before they begin and very, very, particular that they are clean afterward.

Save all the old handkerchiefs, napkins, or pieces of old tablecloths, the skirts of worn-out nightdresses, old sheets, or any old piece of soft

white linen or muslin. Cut off all buttons, hems, or thick places; wash, boil, and rinse carefully. When they are dry, cut in convenient sizes, lay on a clean sheet on the table, and iron. Get from the grocery store a tin cracker or biscuit box, wash and boil it. In this put your pieces of old muslin and keep it tightly closed. Put this in the linen closet. Then in case of emergencies, burns, cuts, or any other accidents, you will have clean dressings ready to use at once. Save the longer pieces of muslin for bandages. Make a few long ones, one and one half or two inches wide, and others one inch wide. Roll these tightly, fasten each one with a small safety pin, and put these in a glass jar or even a jelly glass with a tight top. You can buy sterilized bandages at the drug store if needed. Jelly glasses are very nice for medicine-closet supplies as they have large open tops, do not take up much room, and are cheap.

Castile soap is best for the baby, for washing cuts before dressing, for an enema, and for the hundred and one things which call for careful cleansing.

Put some wooden toothpicks in a short large-necked bottle or jelly glass. They are to be used with a tiny bit of absorbent cotton, twisted on

the end, for removing dirt from the eye, for cleaning between the teeth, or cleaning a cut before bandaging.

When you prepare the sterilized water, boil the fruit jar or bottle and the funnel, the same as for the boracic solution. Boil the water and pour through sterilized cotton. This water will be used for cleaning cuts or burns, for washing inflamed eyes, etc.

If you wish to be very elegant indeed, you can have a little glass tray on which you will carry your medicine glass and bottle, spoon, dressing forceps, etc. A white enamel pie plate makes a splendid substitute for the glass tray.

Put the baking soda in a large necked bottle or tightly covered jelly glass.

Have a space large enough at the bottom of the closet to set the bedpan on end. Before the bedpan is set away in the closet, after having been used, always scrub, scald and air it in the sun so that it will not only look clean but will smell clean.

The hot-water bag can hang on the inside of the closet door. This must be emptied and drained of all the water. Then blow in the bag until it is fully distended, screw the cover on quickly,

keeping it full of air. This keeps the inside of the bag from sticking and will make it last much longer.

The opening in the top of the rubber douche bag is much larger, and after draining and drying carefully, put a crumpled piece of tissue paper or a piece of gauze in it to keep it from sticking. Leave the end of the paper or gauze hanging out, so you may remove it easily and quickly. The rubber tip should be scrubbed with soap and water, washed and boiled and kept in a tin box. Rubber supplies are expensive but will last much longer if given careful treatment. Always roll rubber tubes around something to keep them lying in curves. Bending them over a sharp edge will crack the rubber.

HOW TO GIVE AN ENEMA AND A DOUCHE

The large and small intestines together are from twenty-five to thirty feet long—plenty of space for many unpleasant and painful things to happen. Keeping this canal, as it is called, in good working order is absolutely necessary for health.

The food is digested in the small intestines, and what is left over is only that part of the food which is not digested. This should not be allowed to stay in the large intestines and if not carried off naturally, a cathartic or enema should be used. When your patient is ill in bed, she gets no exercise and will probably need an enema.

If a cathartic is given at night and does not cause an action of the bowels by the afternoon of the next day, an enema should be given; also if the patient is nauseated when taking a cathartic. The water will enter the bowel easier if the patient lies on her left side, but if she is not accustomed to taking an enema, it would be better to have her lie on her back, her knees drawn up to relax the

muscles of her abdomen, and the douche pan in place. The intestine empties itself by a process called peristalsis, which is a wave-like or worm-like motion, extending along the length of the bowel. When the bowel is obstinate about performing its duties, it must be stimulated to act, by giving an enema, which is an injection into the rectum, of water containing soap, glycerine, or turpentine. The doctor sometimes prescribes other ingredients.

Some people have great trouble in retaining the water of the enema and cannot endure the unpleasant feeling. If the flow of water is stopped the instant it becomes painful, your patient will not dread the operation. The flow can be stopped by the little attachment on the rubber tube, or by folding the tube on itself and holding it. Do not remove the tip from the rectum, as the pain stops very quickly. After waiting a few seconds, more water can be given.

TO GIVE AN ENEMA

Cover the patient with a blanket and put a rubber sheet under her. Put the bedpan on a chair, the foot of the bed, or where you can easily

reach it. Lay a folded towel or pad over that part of the bedpan where her back will rest. Put the warm soapsuds in the rubber bag and hang it two or three feet higher than the patient. Place the bedpan under the patient and rub vaseline or oil on the hard rubber tip. Let a little water run through the tube to expel the air. Then gently insert the tube in the rectum.

If the bowels have not moved recently, the rectum may be full of hard fecal matter which will not respond to the enema or may not let the water enter the bowel. If this is the case you will have to remove this hard mass with a warm oil enema or with your finger. If you use oil, you will need a Davidson syringe or a bulb syringe, such as is used for babies. Heat the oil until it feels warm but not hot, put it in the bulb syringe and inject slowly into the rectum. This may remove the mass without further trouble. If not, you must do it with your finger. If you have a rubber cot, put that on your first finger. If not, trim your nail and file carefully, then press the nail into a cake of soap. This will keep it from hurting the lining of the intestine and will not let the fecal matter under the nail. Use oil or vaseline on your finger. This must be done very gently and when

the patient is rested, give a warm soap-and-water enema.

Do not hurry the enema. Give the water time to soften the hard mass in the intestine. It may be done successfully in ten minutes and it may take twenty. Do not be frightened if, after giving your patient two quarts of soapy water, she retains it all. Her system needed the water and so absorbed it. Just give another enema. The patient must be bathed and dried carefully after the enema. Do not give an enema until an hour after a meal. It might cause nausea or a sickness of the stomach.

SOAPSUDS ENEMA

A grown person will take from one to two quarts of water. A child about half that quantity. Use Ivory or castile soap. Stir the cake of soap in the water until it looks a little milky. A quantity of froth is not wanted and must be removed. Air must not be injected in the rectum with the water.

GLYCERINE ENEMA

If the bowels are obstinate about moving and do not respond to the soap-and-water enema,

give a small enema composed of a pint of warm water and two or three tablespoonfuls of glycerine.

TURPENTINE ENEMA

When a patient is suffering from gas pains, a turpentine enema is often given. Prepare warm soapy water, as for a soap-and-water enema, and add from two to four tablespoonfuls of turpentine. Shake well, as the turpentine must be thoroughly mixed with the soapy water. This will be found helpful in expelling gas after an operation or at any time when sharp, tearing, gas pains are giving trouble.

HOW TO GIVE A DOUCHE

When people outside of hospitals speak of douches, they usually mean a vaginal douche. There are many kinds of douches. A douche means a stream of water used to cleanse or heal any part of the body.

Douches are used for inflamed eyes, for the nose, throat, or ears. These are usually ordered by the doctor or given by him. The vaginal douche is the one usually given by the home nurse. When you give a vaginal douche, the

doctor will tell you how hot to give it, what and how much medication to use, and the quantity of water. The douche nozzle must not only be clean but must be boiled from three to five minutes. Great care must always be exercised in giving a douche, especially if given after the birth of a baby.

Have the patient lie on her back with her knees drawn up and a folded towel or pad over that part of the bedpan on which she rests. If the patient is uncomfortable with the pan under her, try using a small pillow under the small of her back, close to the pan, removing the pillow from under her head, as the hips should be higher than the head. The rubber bag containing the water should not hang more than two feet above the patient, in order that it may not run with too much force or too quickly. Expel the air from the rubber tube, by letting the water run through the tube the same as in giving an enema. If the patient has a discharge from the vagina, pour warm water over her, and clean carefully with a piece of absorbent cotton, which afterward must be burned. After the douche, dry the patient, and after cleaning the douche nozzle and bedpan, scrub your own hands.

POULTICES, APPLICATIONS TO RELIEVE PAIN, OINTMENTS AND LINIMENTS

Many times a hot application will relieve pain. This may be applied in many different ways: a hot-water bag, bottles or jars of hot water, hot flatirons, bricks, or bags of hot sand or salt. These are all comforting and relieve the pain of a stiff neck, backache, rheumatism, and neuritis. This is dry heat. If moist heat is desired, a fomentation or stupe, as it is called, or a poultice is used. In case one has a boil or sore finger caused by a sliver, thorn, or infection, a poultice is sometimes used.

BREAD POULTICE

A very simple and easily made poultice is one of bread and water, hot water made thick with bread crumbs. This is a very old-fashioned poultice and almost all grown-ups can remember wearing one at some time during their early school days. Only in those days they were made of bread and milk, not bread and water. The milk

is liable to sour and the water does just as well. This poultice can be put warm and soft directly on the finger which contains the sliver or thorn, covered with a soft cloth and kept warm. This should be renewed often, then the pus forming around the thorn will work to the surface, bringing the thorn with it. After this is accomplished, the sore place should be carefully cleansed, dressed with a piece of muslin from the tin box, and kept protected and clean until healed.

Try all hot applications on your arm or cheek before putting them on your patient. If they do not burn you, they will not burn her, even if she does object. They must be applied hot, but not enough to burn.

FLAXSEED POULTICE

You will need a piece of muslin for a foundation for your poultice. Cut a piece, four inches larger each way than the surface you wish to cover with the poultice. Warm a large thick plate in the oven or near the fire. Have water boiling in a saucepan and sprinkle in the flaxseed with one hand, while you stir with the other, in the same way you make corn-meal mush. Stir with a knife. When the mixture is like a thick paste,

remove from the fire, lay the muslin foundation on the hot plate and spread the poultice to within one inch of the edge of the cloth. Cover this with a piece of gauze, mosquito netting, or old lace curtain, and fold the edges of the muslin over on the poultice. This makes a little muslin frame around it and keeps the sticky mass from running off. Cover the poultice with another hot plate or warm cloth and take to the patient. Always make a new poultice before removing the old one.

A poultice must not get cold on the patient. In about half an hour after you apply the first poultice, begin making the second. The doctor will tell you how long to keep them on. If he says keep the patient poulticed for two hours, that does not mean one poultice for two hours but several poultices, keeping the skin warm and moist. Cover the poultice with a rubber cloth or flannel to retain the heat. When you have finished poulticing, dry the skin and cover it with warm flannel, so it may not become chilled.

MUSTARD POULTICE

First wash the skin where the poultice is to be applied. Anoint with oil or vaseline and cover with a clean cloth.

Mix together two teaspoonfuls of mustard and four teaspoonfuls of flour with enough warm water to make it spread nicely. Spread on a cloth, cover with gauze, cheesecloth or a piece of old handkerchief, the same as in making the flaxseed poultice. Do not use hot water, as that destroys the heating properties of the mustard. The oil on the skin prevents blistering quickly and the poultice can be borne much longer. Look at the skin often to see that it does not blister.

BRAN POULTICE

Sew the bran in a muslin bag. This can be used dry or wet. If dry, heat it in the oven. If wet, pour boiling water over it. To do this, lay a towel over a basin or bowl, then put the bag of bran in the basin on the towel. Pour the water over this, and by twisting the ends of the towel you can wring the poultice without burning your hands. Apply in the same manner as a flaxseed poultice. Hop or slippery-elm poultices are made in the same way.

Bags of hot salt are often used. These are made of heavy muslin and filled only one third or one half full of salt. Heat them in the oven. It is best to have two bags, heating one while the other is in use.

Laudanum is often added to a bread or flax-seed poultice if the patient is in pain.

Hot fomentations or stupes, as they are called in the hospital, are cloths wrung out of hot water and applied to the body. Sometimes a medicine is added to the hot water or put directly on the skin, before the hot, wet cloths are applied.

To wring the cloths without burning the hands, lay a strong towel over a basin, then on that put the cloth which you wish to use for your stupe. (A piece of flannel is best.) Pour over this the hot water, and by twisting the ends of the towel you will be able to wring it quite dry without burning your hands. If this must be done many times, it will save time and trouble if you sew hems, a couple of inches wide, in the ends of the towel, and through these hems run two sticks, then by turning the sticks in opposite directions, you can wring the stupe very quickly. Carry it to your patient in the cloth in which it is wrung. If you have a piece of bed ticking of any strong cloth it will do as well as the towel.

If your patient must have stupes on her back, let her lie on her face with a pillow under her stomach and chest. She will be more comfortable with the pillow. If she must have the stupes on



MANY TIMES THE BED MUST BE RAISED AT THE FOOT
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WHEN THE PATIENT MUST HAVE STUPES ON BACK OR ABDOMEN
 USE TWO BLANKETS TO AVOID UNCOVERING THE CHEST
 AND SHOULDERS WHEN APPLYING STUPES

her abdomen, place a large pillow, or two small ones, under her knees. Use two blankets to cover your patient, one large one and one small one. Put the large one over her feet with the top edge reaching to her abdomen or as high on her back as you apply the stupes. Place the small one over her shoulders and let it come down over the edge of the first one. Then when you apply the stupes, lay back the blankets where they come together. This will save uncovering the chest and shoulders of your patient. Cover the stupes with oiled muslin, rubber cloth or flannel, to retain the heat. When you have finished giving the stupes, dry the skin carefully and cover with a warm dry cloth.

To make a turpentine stupe for a grown person, mix together one teaspoonful of turpentine and two of sweet or olive oil. For a child, one teaspoon of turpentine and eight teaspoons of oil. Mix carefully, and with a piece of absorbent cotton anoint the skin where the stupe is to be placed. Then wring the folded flannel cloth as directed, give it a little shake when you take it from the stupe water to let air in between the folds, and apply as hot as you can hold it on your own cheek. Have two pieces of flannel for stupes and

change every five minutes, during the time ordered for the hot fomentation. Put a hot cloth in place when you remove the cool one. Anoint with oil and turpentine every third time you apply the hot cloth. Stir well each time that the turpentine may be well mixed with the oil.

To use a liniment, wash the skin with hot water and soap, dry, and rub in the liniment with the hand, until it is absorbed by the skin. Place the palm of your hand (or, as the Masseuse says, the heel of your hand) on the painful spot, and without lifting it move gently with a circular motion. This massages the deep muscles and helps lame backs, stiff necks, and lame legs. Always wash the hands carefully, after using liniments, as they sometimes contain poisons.

Ointments are spread on a piece of clean muslin and applied to the sore place, or are rubbed into the skin in the same way as the liniment.

The doctor sometimes orders cold applications to relieve pain or congestion. The easiest way is to use cloths wrung from ice water or that have lain on the ice. Alcohol added to the ice water makes it seem colder. This needs the entire attention of one person, as the cloth becomes warm quickly and must be changed at very fre-

quent intervals. Wring carefully and place a rubber cloth covered with a sheet or towel under that part of the body where they are applied. Ice caps are used in hospitals and are most convenient and easy to use if they can be obtained. If you use an ice cap, fill it only half full of pieces of ice as large as an English walnut. Hold your hand tightly around the top of the bag to expel the air, then screw on the top. Cover with a piece of gauze or an old handkerchief. If the cap is only half full, it will fit nicely over the head, or place on the body where it is needed.

When you have finished using the cap, wash it, dry carefully, and put a handful of crushed tissue paper or piece of gauze or muslin inside so the sides cannot stick together and spoil the bag.

If cold compresses are needed for an eye, cut several pieces of absorbent cotton just large enough to cover the eye, about the size and shape of a glass in eyeglasses. Lay these on a piece of ice and change frequently. If there is a discharge from the eye, do not use the same piece twice. The ice will keep much better if you turn a sieve upside down in a basin and lay the piece of ice on the sieve. In this way the ice cannot touch the water and will not melt as quickly.

CHILDREN

Begin at the very beginning with children and teach them that good health will depend in a great measure upon themselves. Teach them to clean their teeth, to be watchful and regular with their bowels, to wash their hands before eating and after they come home from school, and to bathe regularly. These things can be made habits and, if managed in the right way, will not make fussy children. They should be done regularly and without comment, just as the child gets up each morning and eats three meals a day.

If your child is sick or not strong, do not talk about it before him. Do not discuss his symptoms or medicine, for this will make him self-conscious and concerned about himself. It is not good for him and makes him anything but attractive. A grown-up person who is always dwelling upon his symptoms and pills is anything but good company, and a child who does this is often disliked, when really it is all the fault of the parents.

Teach the children not to put their hands on

railings, or banisters in public places, and to keep their gloves and hands away from their faces. One sees things in the cars or on the street that makes one wonder whether some mothers value their children at all. In these days, when the newspapers are full of warnings, one would hardly believe that a mother could sit calm and unconcerned and allow her young son, of two and one half or three years, to clean the car window with his tongue or to put his fingers in his mouth and draw pictures on the window, returning his finger to his mouth every few seconds to wet it, in order that it may make better marks.

One day I saw in the Battery Park aquarium a long line of very dirty people passing in front of the fish tanks. All of these people kept their hands carefully on the rail which separated them from the tanks, leaving their own germs behind and collecting those of their predecessors. Little foreign children are much like American youngsters. They also kept their hands on the rail, stopping occasionally to put their mouths on it. This sounds revolting to you, and yet if you take your children to see the fishes, which you should do if possible, they will immediately put their hands on this same rail.

It is only a habit, this handling of everything. Teach children that their eyes are not in their fingers. Have you never seen a woman on a shopping tour stop and handle everything laid out for inspection, whether she had any idea of buying it or not? Only old or feeble people should put their hands on banisters or railings in public places. People who are too young to walk alone should have a guiding and protecting hand in public. These citizens of tender years are the ones who not only handle but taste indiscriminately. Buy a magnifying glass and show the dirt on the legs of the fly and on other things; then your warnings will not seem like fairy tales.

Buy a thermometer and take it to your doctor for instruction, or if you know a trained nurse she will teach you how to use it. Very often the first sign that something is wrong with one of the children, will be a rise in temperature. If he complains of a headache, has flushed cheeks and no appetite, you may be sure he has "caught something," or, as our grandmothers used to say in accusing tones, "has been eating something." Take his temperature. If it is near green apple time, make searching inquiries, or if earlier in the

spring and there have been a few very warm days and you live near a lake or a river, feel of his hair and ask him if the water is warm. He may have been tempted to take an early plunge and in consequence may have tonsilitis. Look at his chest, stomach, or neck to see if he has a rash. Ask him all about his trouble, where he has pain, and if it is a dull or a sharp pain. Then telephone the doctor and you will be able to answer his questions in an intelligent manner. A rise of temperature is not as serious in a child as in a grown person. It may mean indigestion, and if so, a dose of castor oil will make him a new man.

In the hospitals the temperature of a child is taken in the rectum. It is not always safe to put a thermometer in the mouth of a small child, for if he struggles or bites, he may break the thermometer, and broken glass is a serious thing. To avoid accidents of this kind and to secure a more accurate temperature, the rectal temperatures are taken. Put a little oil or vaseline on the thermometer and insert very gently. If the child is not sick in bed, the best position is the one enforced upon us in our early youth when undergoing an old-fashioned spanking.

If your child seems stupid, does not get on well in school, and sits with his mouth open, do not feel that he is headed toward an idiot asylum. At the very first opportunity, head him toward the doctor. He probably has adenoids, and if these are removed he may be the smartest member of the family.

Many children have harsh and cruel things said to them because of seeming stupidity, when the parents are the ones who are stupid. No normal child sits or sleeps with his mouth open, and if your child does this, it is your duty to find out why he does it and have the cause removed. There may be other things besides adenoids which are troubling him. His hearing may be defective or he may need glasses. A mother once told me about her son, whose seeming denseness and stupidity during his early years was a constant mortification to her. When sent on errands to places where he had been with her only the day before, he would come home without being able to find the place, and he did many other foolish things which seemed absolutely without excuse. One day she discovered that he was very nearsighted. He was at once taken to an oculist, and when he returned wearing glasses, he said: "Why, mother, there

is another side to the street. I never knew that before." The mother told me that the sharp things she had said to him for his seeming inattentiveness had been hurting her ever since.

If your child wets the bed, do not punish him, but take him to the doctor. If he hates his woolen underwear, do not make him wear it. Give him cotton underclothes and a sweater to wear under his overcoat if he needs it. Wool is very irritating to some skins, and I have known children to endure torture from fall until late spring because their mothers were superstitious about woolen underclothes. Any one who has been in a continual itch all the winters of his youth, will not forget it, and will see that his own children are not tortured in the same way. In a book which was published no farther back than 1911, people are gravely advised to use white flannel bandages for one condition and red flannel for something else. Such advice is on a par with the recommendations and treatment of the rag priestess, who tells you your disease and what to do for it, by holding in her hands a bandage which you have worn overnight.

The children's clothing must hang from the shoulders, using elastics, which fasten on an

underwaist, to hold the stockings. Do not use garters around the leg, and if the baby's sleeves are too long, turn them back at the wrist. Do not put tight rubber bands around her arms. This interferes with the circulation.

It is not considered necessary in these days for children to have contagious diseases. I remember hearing a mother say: "All the children in the neighborhood are having mumps. As it is spring and warm weather is coming on, I think I will see that my small daughter is exposed, and that will be one more thing over with. This is the best time of the year for children to have mumps."

There is no good time of year for children to have mumps, measles, or whooping cough. The mothers are careful to avoid exposure to diphtheria and scarlet fever, and children are warned about these diseases, but many ignorant mothers believe that measles, whooping cough, mumps, and chicken pox are necessary evils and calmly allow their children to be exposed. These diseases weaken the child, and each sickness of this kind puts him in a condition to more easily contract something else. Why use up his vitality in this way? It is better to take every precaution and protect your child, thus helping to stamp out these diseases.

Teach the children very early in life that constipation is more deadly than the dragon in the fairy-tale book. Young children must be watched and taught the importance of regular habits. When they become feverish or irritable, an investigation will probably show that the bowels are not in good condition. If the bowels do not move well every day, feed your child bran bread, graham bread or graham muffins, orange juice, figs, or prunes for breakfast. If this does not correct the trouble, tell your doctor and he will prescribe a remedy. This is most important, for other kinds of troubles, as well as fretfulness and stupidity, arise from neglected constipation. No one can be cheerful, bright, even tempered, or well, if he is absorbing poisons. The bowel movements may be fairly regular but at the same time contain indigested food. It is best to speak to the doctor about this.

When giving an enema to a child, try to get him to submit without using force. It uses up too much energy and tires both mother and child. Teach your children to have a loving confidence in what you do for them. Sympathize with the dread and fright which unusual things of this kind always produce. Do not say "This is

for your own good," an expression which has been dear to the hearts of many parents, and remembered with resentment by their children. They will be able to understand if you explain to them that an enema is preferable to being sick, taking castor oil, and staying in bed. Children have much more commonsense than is generally believed by their elders and will use it if given half a chance.

When children walk before their bones are strong enough to bear their weight, or if their bodies are not properly nourished, they will have bowlegs. This condition is also often caused by too large a diaper. A remedy for bowlegs, which is more pleasant than splints on the little legs, is an old-fashioned velocipede or tricycle. Get one a little too large for the child; then when he rides he will stretch his legs in order to reach the pedals. This constant stretching of the legs will help to straighten them. He will be like the grown-up who owns an automobile and who is not able to walk around the corner if the car is handy. He will want to ride all the time. This will keep his weight off his legs and you will see an improvement in a short time. Get the tricycle as soon as he is able to ride and while his little bones are soft and easily straightened.

When your young daughter has had the measles and is convalescing but still in bed and of course quarantined, the time will pass very slowly. Put her in a room in which the windows look on the street so that she may have her bed by the CLOSED window. You can buy for her, at the five- and ten-cent store, a pair of dark glasses and she will love to wear them. Ask the doctor's advice, however, before doing this. If she is near the window, she can wave her hands at her friends. Some of them will pass by on the other side of the street, and speak in whispers about the card which says "Measles." Others, very brave, will walk on your side, while very foolhardy ones will dance on your grass and shout, "Who's afraid of measles!" All this will be very entertaining during her convalescence, when she will be hardest to care for. Put a little jacket on her, which can be washed or burned when she is well, give her a bed table, made from a box, which can also be burned, a bottle of library paste and some blunt scissors, a fashion magazine, a seed catalogue, and strips of cardboard. With these can be made a beautiful game. Cut the strips of cardboard an inch wide and three to five inches long, fold at right angles, so that one end will stand. Then

cut stylish ladies, trees, flowers, etc., and paste each one to a cardboard base, the upright end of the cardboard on the back of the lady. This will make her stand nicely. With a little suggestion, your young daughter can be induced to make a garden with ladies having a garden party; or a scrapbook can be called a child's home, each leaf to be a room furnished with chairs, tables, etc., cut from the advertising pages of old magazines. Boys usually like making forests, with animals or a zoo, or, like Robert Louis Stevenson, sail little paper ships across the counterpane sea, with cargoes from foreign lands. Children can be led to originate many delightful stories and games. Their heads are usually full of these and it takes only the key of sympathetic understanding to unlock their hearts and induce them to play fairy stories. Every house has old magazines full of pictures which can be utilized in this way, and friends will be more than glad to contribute material for the entertainment of your small patient. Clothespins with faces marked on them make nice dollies and stand very well if given stiff paper skirts. These things can be burned when they have served their usefulness, thereby destroying all fear of contagion. By giving one thing at a

time and a different one each day, the child will not grow tired of these simple toys.

When your young son announces that he is tired of milk and just can't drink another drop, answer him: "All right, son, we will have something else. I will be the man at the soda fountain and you a customer. Good morning, sir, what flavor." He will grin and say, "Pineapple." Bring in his glass of milk with a drop of vanilla or some other flavoring in it, and a strip of macaroni. Let him drink the milk through the macaroni in place of a straw. Ask him if the flavor is good and what kind he will take next time. This is a game that is always a success and is much easier and pleasanter than the old-fashioned method of holding his nose and making him swallow. Quite a thick gruel can be taken through the macaroni.

Play with your sick child. When his feet are paddling in the bath pan, they may as well be in the sea, in his mind. Ask him if he can feel the sand and it makes things very interesting if a crab catches a toe now and then. Bread and milk is delightful if each mouthful is a city and something of interest is told about the city while it is being eaten. Take a bread-and-milk journey with your son. The first mouthful can be Boston.

Give him a spoonful and say: "Here we are at Boston. 'Listen, my children, and you shall hear of the midnight ride of Paul Revere.'" If he wishes to stay in Boston and hear more of Paul Revere, you can keep on feeding him. His mouth will open unconsciously. In this way the necessary amount of nourishment can be given without protest and wasted energy.

A delightful and everlasting entertainment can be furnished with very little trouble and no expense. Fasten the branch of a bush or tree outside the window where the birds can come to eat. Make holes in pieces of bread or crackers and slide them over the twigs. Use a shallow box or basket fastened to the edge of the fire escape, if you live in the city and have no branches. The birds will soon become very tame, and even older people are very much entertained by this simple device.

A five-cent paper of flower seeds, or a handful of beans, will furnish another fascinating game. The breakfast egg can be carefully cut and the shell saved. Place a piece of cotton on a plate or little tray, thick enough to keep the shell from tipping. Put a little soft earth in a box, spread a large paper over son's lap, and give him a tin

teaspoon. He can fill the egg-shell flowerpots and plant a bean or seed in each one. These he can water each day with a teaspoon. Beans are hardy enough to endure being dug up, to see if they are growing, and will also bear up under much watering.

In February or March bring in branches from the lilac, cherry, or plum trees. Put them in a vase of lukewarm water and stand in the window. They send out leaves and blossoms very quickly and are entertaining when one must stay in bed, or even in the house. These may also give the children a taste for the study of birds and plants. As the child grows stronger the tiny plants in the egg shells can be transplanted to a larger box or set out in the garden. He will be interested in caring for them and this will be good for both his body and soul.

SPECIAL CASES AND CONTAGIOUS DISEASES

COLD

During an epidemic of smallpox a nervous lady telephoned her doctor and said, "Doctor, we have all been vaccinated, what else shall we do to protect ourselves?" The doctor answered, "Keep your bowels open and trust in the Lord."

This is the best of advice for all kinds of diseases, from smallpox to the every-day cold. Germs will find no more encouragement in a clean body than rats and mice will find in a clean house. If you feel a cold or sore throat coming on, take a hot bath, and a hot lemonade with a "stick" in it, if you are not a prohibitionist. If you are, take the plain lemonade and have it hot. Take a cathartic, not a little dose but enough to clean house thoroughly. It is a wise thing to get from your doctor tablets or pills, to be taken at the beginning of a cold. A person having a cold should not sleep with another person, and even

if fond of his family, should restrain himself from kissing them and should sleep with the windows open. If there is soreness in the throat or chest, rub in an ointment made of lard and turpentine. To make this ointment you will need a large plate, a thin knife, one teaspoonful of turpentine, and eight teaspoonfuls of lard. Work the lard over and over on the plate until soft like ointment, using the thin knife. Drop the turpentine on the lard, a drop or two at a time, and mix thoroughly. Rub this into the chest and neck, and cover with a warm flannel. Take a hot mustard foot bath if you cannot have the hot tub bath. Put a half teaspoonful of salt in a glass of warm water and gently snuff it up the nose. This removes the uncomfortable feeling, cleans out the nose, and is healing. Gargle with hot water and salt and do not forget the cathartic.

PAIN IN THE BACK

If you have a pain in your back, do not conclude at once that you have diseased kidneys. There must be something particularly fascinating about a diseased kidney, for it is one of the things which is selected by many people and lovingly kept for

their own. The horribly fascinating portraits of writhing victims of this disease are displayed in the daily papers. The patent medicine advertisements scream at you and dwell at length and most convincingly on the symptoms and their ability to cure, but most of us know that patent medicines cure nothing. At least if we do not know it, it is our own fault. That there are none so deaf as those who won't hear, is very true in the case of people who are spending their money for a bottle wearing a fetching label, and containing a mixture of water with a little alcohol (sometimes much alcohol), a cathartic, and maybe a little strychnine, all of which he could get from his doctor or druggist for one tenth of the cost.

The pain in your back may be lumbago. If you will rest and have someone stir up a mustard plaster, put hot stupes over the lame place, or a few strips of adhesive plaster to keep the sore muscles from pulling when you move, your back will be as good as new and your money still in your pocket.

Backache may be caused by chronic constipation or it may be caused by a strain or a cold. Try a cathartic and hot applications. If this does not cure you send for the doctor, but do not take

patent medicine. Women and girls often have backaches, but they must be treated by the family doctor.

CONTAGIOUS DISEASES

When a patient is quarantined, no one but the doctor and the nurse should be allowed in the sick room. Every precaution must be taken to guard the rest of the family. The dishes and the clothing which are used for the patient must be washed by themselves. Keep the dishes in the patient's room, so that no one else will get them. When the patient is well, the dishes can be boiled for fifteen minutes and used again. Everything which is carried from the sick room should be disinfected. The patient should be kept very clean with baths each day, unless the doctor orders otherwise. In case of scarlet fever or any disease where the skin peels, the patient's skin should be oiled. This keeps the tiny particles of skin from floating about in the air and infecting others. The nurse should wear cotton dresses which can be washed and boiled, should take a walk in the fresh air each day if possible, and should always wash her hands, using a nail brush,

after doing any service for her patient. Do not put your hands on your face; do not kiss the patient or put your face near his face. Clean the floor of the sick room with damp cloths and dust with a damp duster, then wash and boil these cloths. Your doctor will advise about disinfectant and about fumigation of the room when the patient is well. The bedpan must be treated liberally with disinfectant, using as much again disinfectant as you have urine or stool in the bedpan. This must be done before the bedpan is emptied in the sewer or place prepared for it. All toys or books which have been used by the patient should be burned and the room thoroughly cleaned.

If you have time to prepare one, the old fashioned straw mattress will do, if your patient is a child, for he can be lifted from the bed, while you stir and make smooth the straw. This with an old comfortable over the mattress will make a comfortable bed and all can be burned when the child is well. A wood or iron bed could be scrubbed in a strong solution of carbolic and then painted. Many people cannot afford to burn their furniture. Be careful not to spatter your hands or face, as the carbolic will burn. There

need be but one chair in the room. Clean boxes can be used for tables, if covered with towels. Another box with shelves could be used for a cupboard in which to keep the dishes and play-things. Toys, books, and boxes must all go on the same bonfire.

If you are not able to wash the sheets, pillow-cases, nightgowns, and towels as quickly as they are soiled, they should be put in a tub of cold water, or water and disinfectant, until you can attend to them. This keeps the dust from flying about and lessens the danger to other members of the family. Children should not be allowed to play with cats or dogs when recovering from contagious diseases. Scarlet fever can be carried to an entire neighborhood by one kitten.

TYPHOID FEVER

When a person has typhoid fever, his intestines are full of ulcers or sores. The nurse will readily see that her patient must not sit up in bed, must not move quickly, or, if very ill, must not move himself at all. He must not get out of bed for any cause whatsoever; whether he dislikes the bedpan or not, he must use it. The walls of the

intestines are thin and anyone can easily understand that these thin walls, which are covered with sores, are more than likely to break through or become perforated, if given a quick strain, or IF SOLID FOOD IS GIVEN. A crumb or little hard mass of food lodging in a sore may be the last straw which perforates the thin wall of the intestines. If this happens, it means death. A liquid diet is absolutely necessary and should be given through a drinking cup, a glass tube, or a straw. If the patient must have his head lifted to swallow, the nurse must lift it for him. There must be no company and no more of the family than are needed to care for him. Keep his drinking glasses, cups, plates, etc., separate from those used by the family. These must be washed by themselves with a pan, towels, and dishcloth kept for that purpose. All clothing used for the patient, towels, and bedclothing must be disinfected, washed, and dried in the sun.

The patient's mouth will need great care. The tiny mops made with toothpicks and a bit of absorbent cotton will clean between the teeth. A piece of absorbent cotton wound on the finger will clean the mouth and tongue. The nurse must be very gentle, as the gums bleed easily.

Boracic acid solution can be used as a mouth wash unless the doctor has something which he prefers.

The patient must have warm cleansing baths, but must be moved as little as possible. With practice or a little forethought, you can bathe and dry his back and put a clean sheet in place by turning him once. His back can be bathed when the sheet must be changed. Directions for the cooling bath, which he will need if his temperature is high, will be found in the chapter on baths. If the patient has a headache or is "out of his head," wring a cloth out of cold water and put over his forehead.

Sometimes the abdomen is full of gas which will make it look round and full. If the doctor orders turpentine stupes, you will find directions for them in the chapter on applications to relieve pain.

If a bowel movement is dark and looks as though it contained tar the doctor must be told at once. This dark tar-like color is caused by blood. The patient has had a hemorrhage. Raise the foot of the bed and take away his pillow, but do not be panicky about it. No matter how disturbed you are, you must be cool on the outside, for the patient must not be excited. All

food, water, and medicine must be stopped until you hear from the doctor.

If you live in the city or village where there is a sewer, be very careful about disinfecting the bath water and contents of the bedpan before they are put in the closet. If in the country and an outside closet is used by the family, do not empty the bath water and bedpan into it. Have some member of the family dig a hole, away from the house and below the well or water supply of both house and the barn. In this hole, empty the bath water, urine, and bowel movement, after they have been disinfecting. Keep an old fire shovel, dustpan, or even a shingle, by the hole and as quickly as you empty the bedpan, shovel in dirt enough to thoroughly cover the stool. Any cloths, cotton, soiled pads, paper, or cloth used for wiping the mouth and the tooth-picks used to clean the teeth must be burned here. Have a plentiful supply of chloride of lime and use it. Everything must be covered thoroughly with earth, so that the flies will not be attracted. This hole must be covered with boards so that nothing can get in it, and when the patient is well must be filled with earth and plenty of lime. Do this carefully and you will not have an epidemic of

typhoid on your conscience. Use quicklime. It is cheap and you can have any amount of it. Mix it with water until it is like cream, cover the contents of the bedpan with this, and pour it into the hole where you bury and burn the refuse from the sick room.

As the patient grows better, he will have absolutely no judgment about his food. It will be the big thing in the world to him and he will be hungry all the time. The liquid diet will grow very tiresome to him but it means life, and solid food means a serious relapse, or death. You must be firm about this, for it is one of the most important parts of typhoid nursing. He must be fed like a baby and his temperature taken regularly, even after he is out of bed. As he grows better, his temperature will be higher at night than in the morning, but not as high as it was the night before. Each night it will be a little less until it reaches normal.

The nurse must take great care of herself. Her hands and nails must be scrubbed. She must never eat anything before washing her hands and must not eat in the sick room. When the patient is better, be careful about visitors. Do not let them take any fruit or food into the sick room

and do not let them stay long. Everything must be fumigated and cleaned after the patient is well.

Remember that the doctor is the best judge of what the patient should eat. There will always be friends who will feel perfectly competent to advise in this matter. They will not tell an engineer how to run his train or a tailor how to cut his cloth, but will know much more about the needs of the patient than the doctor, or the trained nurse if there be one. It is usually safe to let the engineer run his train, or the tailor cut his cloth, so why not, as he has been trained for it, let the doctor prescribe for his patient. Someone will say, "My cousin's half-sister ate whatever she wanted when she was sick and was in much more pain than your father." True, but "my cousin's half-sister" had a broken leg and your father has typhoid fever. Don't argue with these kind-hearted people, but take what they bring. Then when your father is comfortably resting, scrub your hands to avoid infection, sit down in an easy chair in the next room, and eat the rice pudding, the sponge cake, and the fruit that was never known to hurt anyone, and say nothing. There are many gravestones which should bear this inscription: "Killed by our loving friends."

PNEUMONIA

Pneumonia is often brought on by exposure, when the person is very tired. It will probably do you no harm to get wet, if you take a hot bath and a hot drink and put on dry clothing.

One attack of some diseases discourages a second, but with pneumonia a second attack is more easily contracted than the first. A person who drinks alcoholic liquor to excess is going to have a much greater fight to live than one who is temperate or one who does not drink at all.

This is a short disease, lasting from three to eleven days. As the heart is weakened by the disease, the patient must be kept in bed. He must lie quiet, not moving or being moved more than is absolutely necessary. He must be helped to drink and must use the bedpan. Liquid diet is usually given but the doctor will order the diet. What he orders must be given the patient and nothing else.

The windows must be open all the time, even in winter. No one but the nurse must be in the room unless she needs help in lifting the patient.

The patient's mouth should be cleaned carefully with a mouth wash and cotton on the finger, after which the nurse must scrub her hands carefully.

The patient will cough and expectorate, so little pieces of cloth or paper should be used by him in place of a handkerchief. These pieces of cloth or paper should be put at once in a paper bag which is always near the patient. This must be burned, as the germs of the pneumonia are in the sputum. Great care should be taken with the bath and about exposing the patient. Bathe him only enough for cleanliness and do it under a blanket. Good nursing is most important. The patient must not move himself or reach for things. The nurse must hold the glass or cup from which he drinks. Wipe his mouth with a cloth or paper after he coughs and keep him quiet. There must be no talking or excitement. The patient must be watched constantly, as he may be delirious and try to get out of bed. Use pads under the patient's hips, for if he is unconscious and his bowels move without warning, this will enable you to keep him clean without moving him to change the sheet.

SCARLET FEVER

Scarlet fever is to be dreaded because it is dangerous in itself and because it may lead to many serious complications. The patient and the nurse must be isolated at least six weeks.

In scarlet fever, the eruption comes first on the neck, chest, and back, and then over the entire body.

A mild case must have as careful attention during the fever and convalescence as a more serious case. The patient must not be allowed to overeat, take cold, or get overtired.

A child may not be sick in from one to ten days from the time he has been exposed. Young children sometimes are taken with convulsions, older children with a chill, or it may come on with a sore throat, headache, high fever and vomiting. At first the rash is only pale red points. Later the rash is bright and covers the body. The throat and mouth will be bright red, the tongue will be coated white and later will have red spots on it. This is called the strawberry tongue and is one of the symptoms of scarlet fever.

The patient must be put in a room by himself at once. All unnecessary furnishings must be

removed from the room, for everything in the sick room should be burned after the patient is well. The patient must have no company and absolute quarantine must be insisted upon. All clothing taken from the room must be carefully disinfected. Keep a sheet, wet in a disinfecting solution, hanging over the door of the sick room.

This disease is not necessarily fatal, if the patient is strong and well nourished, but even with careful treatment there may be unhappy after-effects, such as a weak heart, deafness, weak eyes or blindness, a weak throat, subject to tonsillitis, or inflammation of the kidneys. The mouth and throat will need great care. The doctor will probably order a liquid diet for the patient. After the fever is lower, the patient may have a light diet. This diet should be nourishing but nothing should be given which is at all hard to digest. The doctor will order the diet.

The patient must be carefully guarded against a relapse. He may recover from the fever and then some little thing will cause a relapse, which will be much more serious than the fever. A little boy recovering from scarlet fever played by an open window. The weather was damp and rainy and the little boy took cold. His

relapse was very much worse than his fever, with serious kidney complications. This caused both additional expense and heart-breaking anxiety to the parents.

Everything must be carefully disinfected and cared for as in typhoid fever. Dishes, clothing, and bedding must be soaked in disinfecting solution and washed by themselves. The child must be kept quarantined as long as the peeling continues, which will be from two to six weeks. The room must be well aired all the time, but the child must not be in a draft or take cold. Rub his body with olive oil, or lard, every day. This will relieve the itching and keep the particles of skin from floating about. Do not let the patient out of bed until the doctor orders it. You will be able to tell when the peeling is accomplished, for the palms of the hands and the soles of the feet are the last to peel.

When the patient is let out of quarantine, he must have a warm bath, including his hair. The nurse must do the same. Everything in the room which can be burned should be burned at once. The woodwork must be washed and the room fumigated. It is best to ask the advice of the doctor about the fumigation of the room.

Many things which were at one time considered good fumigators have since been discarded as worthless, one of these things being the sulphur candle. The fumigator which is now considered the best is formaldehyde. This is what is called germicide. When the room is fumigated, all cracks must be closed and the closet doors and bureau drawers left open. The pillows and mattress, if not burned, should be ripped open, so that the fumes of the formaldehyde may penetrate thoroughly, killing every germ. The health officer of a town will, as a rule, attend to the fumigation. If you cannot afford to burn the bed, it must be taken out of doors, thoroughly scrubbed with a disinfectant, and repainted. Scarlet fever germs will live for years. Children have been known to take the disease from books used long before by other children having scarlet fever. Give paper and wood toys to your child and burn them on the general bonfire after his recovery. No matter how good a thing may be and no matter how much you dislike parting with it, you will not think it worth a life. One or many lives can very easily be sacrificed by a single picture book or mattress, saved after scarlet fever.

DIPHTHERIA

Diphtheria is a highly infectious disease and absolute quarantine should be observed. This is fully as important in a light case as in a severe case. Careful nursing is necessary. The throat will need particular attention. The first day the throat will be red, then a gray membrane will form. When spraying the throat, the nurse must protect her eyes with glasses and her nose and mouth with a cloth tied over them. The patient will have swollen tonsils, be feverish, and have difficulty in swallowing.

The child will need a quantity of nourishment, which must be in liquid form, and should be given plenty of drinking water. It is necessary that the patient take a liberal amount of nourishment to give him strength, as the disease is very weakening. Absolute quiet and rest for the patient is necessary. The doctor may order quicklime to be slacked in the room, or a boiling teakettle, to keep the air moist. In either case, the croup tent, described in the notes on croup, can be used. The pulse of the patient must be watched carefully and all orders of the doctor strictly obeyed. All cloths or paper napkins used for wiping the mouth or

nose must be burned at once. The germs of the disease are in the discharges from the nose and throat and in the membrane. If great care is taken to catch all discharges in cloths and burn them at once, there will be very little danger for the rest of the family. The period of isolation will depend upon the recovery of the patient. The doctor will take cultures of the throat and will tell you what to do. When the patient is better, he is still not out of danger, as there may be many disastrous after-effects, the same as in scarlet fever. The patient must have plenty of nourishing food and fresh air. The voice may become very weak but will grow stronger as the patient grows stronger. Everything in the room must be disinfected, the same as in scarlet fever. The doctor will give antitoxin to the patient and all members of the family who have been exposed. Since the use of antitoxin, diphtheria is not as terrifying a disease as before.

MEASLES

Measles is very infectious and in almost all places a strict quarantine is required. It may be given to others from the time the patient is first

sick until the skin has entirely finished peeling. This peeling or desquamating, as it is called, is not like scarlet fever where the skin comes off in little pieces or strips but is fine and easily scattered or carried on the clothing. Infection is also spread by the discharges of the nose, mouth, bladder, and bowels. These discharges must be disinfected. The eyes will need particular care. The patient must not be where a light can shine in his eyes either from the sun or a lamp. In some cases it is necessary to darken the room. If the eyes are not sore, dark glasses are very convenient for the patient can see what is going on about him and be entertained.

Some children have measles very lightly and others are very ill. Measles often go through a school or town, leaving many little graves behind, and is not to be treated lightly as a necessary evil but should be avoided. A child coming down with measles usually begins with the symptoms of a cold. He will be feverish, then chilly, will run at the nose, have no appetite, feel stupid or languid, and have inflamed eyes. Sometimes he will vomit. There is a peculiar characteristic odor which goes with measles and sometimes it may be identified by that. The rash usually shows on the

fourth day. It comes on the chin, forehead, throat, face, and then the body. Put the child in bed and keep him warm. The rash lasts from two to five days and then fades away. Then the peeling or desquamation begins. Sometimes the patient is very ill and very uncomfortable with sore throat and fever. The nose, mouth, and throat must be cleansed with a boracic acid solution unless the doctor orders some other mouth wash. If the patient's nose is sore, cleanse it very gently with a tiny piece of cotton on a toothpick, using vaseline or sweet oil. Keep the room well aired but the patient must never be in a draft. While he is convalescing keep him away from the open windows, especially if it rains or is cold. This might cause a serious relapse with pneumonia.

The patient's food will be milk, broth, eggs, or gruel. If he is not very ill, the doctor may let him have toast, fruit, and many other things.

MUMPS

A case of mumps will usually be ushered in with headache, vomiting, and pain under the ears. One of the distinguishing symptoms of

mumps is an inability to eat anything sour. The acid causes great pain. The patient should be kept in bed until the swelling is entirely gone. The mouth should be washed frequently and the throat gargled if the patient can do so without pain. The bowels must be kept open and a liquid diet given as long as the fever lasts. As it will be painful and difficult to open the mouth, water and nourishment should be given through a drinking tube or straw. While this disease is very painful it is not dangerous of itself but must have careful nursing for it is often followed by serious complications.

WHOOPING COUGH

Whooping cough begins like a cold and will continue about this way for about ten days when the distinctive cough will be heard. The patient will often vomit when coughing. He should be kept away from other children but should be out of doors in fair weather unless coughing violently or has nose bleed. Then he should be put in bed and given a large pillow. He should be kept warm, given a light diet, and his bowels should have careful attention. The child will cough

from one to three months. Whooping cough is a wearisome disease and should be avoided if possible.

CHICKEN POX

Chicken pox may cause very little trouble, especially with children. It sometimes causes vomiting and pain in the back or legs. The pimples come first on the back and chest and later make tiny sores. These sores will heal without leaving scars if the patient does not scratch them. A heavy attack of chicken pox resembles a light attack of smallpox, only in smallpox the rash comes first on the face. This is a good thing to remember. If the children in your neighborhood are having chicken pox and your child has a rash on his body and vomits, give him a warm bath, a light diet, and keep him warm and dry. If, however the rash comes first on his face you should have your doctor see him at once. A child having chicken pox should be kept away from other children, until the tiny sores are healed. He should have a sponge bath each day and the scabs or the crusts of the sores should be oiled. This can be done with a small piece of absorbent

cotton. Do not rub the sores but touch or pat them gently with the oil and cotton. After the child is well, wash his clothing and the bed linen, air the mattress and pillows in the sun, and clean the room. Fumigation is not necessary.

GERMAN MEASLES

German measles resembles measles but is not as serious. The rash comes first around the mouth, on the neck and back of the ears, then on the chest and body. The patient as a rule is not very ill and does not need to be in bed. He should have a light diet, be kept warm and away from other children from ten to fifteen days. Disinfection is not necessary after this disease. Clean the room, wash clothing and bed linen, and air mattress, pillows, and blankets in the sun.

CROUP

Anyone who has been awakened in the night by the hoarse croupy breathing of a little child will not forget it, neither will he forget the terror-stricken hurry to relieve it.

There are two kinds of croup. The most

common type is spasmodic croup which usually responds to treatment and is seldom fatal. Membranous croup is much more serious, but the treatment given before the doctor comes is the same in both cases. Keep the child in a warm room where you can have a boiling teakettle. Damp air relieves the difficult breathing. Put cloths wrung out of hot water around the child's throat. If this does not relieve the patient, give him one teaspoonful of syrup of ipecac and repeat every half hour until he vomits freely. Put him in a hot bath, taking care not to burn him. Place the kitchen table near the stove. Lay the mattress from the child's crib or two or three pillows on the table, cover the inside of a long handled umbrella with a woolen blanket, and tie the umbrella handle to the leg of the table. Tuck the ends of the blanket which hang from the umbrella under the pillows at the end and one side of the table making a little tent. Lay the child under this with a large pillow under his head. Make a tube of stiff paper and pin over the spout of the teakettle to direct the steam under the umbrella.

In case you do not have syrup of ipecac in the house, do not wait to send for it. Give one tea-



PAPER TOYS CUT FROM OLD MAGAZINES AND MADE TO STAND
WITH CARDBOARD STRIPS. THESE CAN BE BURNED
WHEN THEY HAVE SERVED THEIR USEFULNESS

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THE CROUP TENT

spoonful of mustard in a cup of warm water or one tablespoonful of salt in a cup of warm water to make the patient vomit. The child will not take this as easily as he would the syrup of ipecac. It is so much for a little person to drink. Keep cool yourself and do not excite the child. Avoid anything that will make him cry or cough. Keep up this treatment until the doctor arrives. A woolen blanket must be used on the umbrella as it will absorb moisture. A cotton sheet would not hold the moisture and would allow it to drop on the patient. The child's bowels must be kept open and he must have great care for several days after the attack.

A STITCH IN TIME

Doctor Woods Hutchinson in his book, *Instinct and Health*, says, "The influence of modesty, that curious virtue which begins just where innocence and purity leave off, would require a whole chapter, but it would be both humiliating and hopeless. Suffice it to say, that the story of the fig leaves in the garden of Eden is both typical and significant. It never occurred to our first parents that they needed them until after the episode of the apple."

Ignorance is not innocence and many times leads straight to sin and misery. As soon as your child begins to ask questions, that is the time to tell him the great truths of nature. If you lie to him and say "a stork brought you," "the doctor brought you," or any other tale which has been made up by people who are too evil minded to see the beauty and sacredness of the wonderful miracle of birth, then the truth will be told him at a very early age and at the first opportunity, by some other child who has a fund of perverted

knowledge which he is sowing about him, in the same way a thistle scatters its seeds. I have known a single girl at school to enlighten twenty others with the aid of a doctor book which she had found at home in a locked drawer; a perfectly good book, which should have been explained to this girl long before by her mother, for then there would have been no morbid curiosity about the subject, or desire to tell others. If it had been told as a story or a lesson, she would not have gone about repeating it. Who ever knew a girl, or a boy either, to take a playmate back of a big tree and tell over their spelling lesson or the story of Robinson Crusoe?

If you do not know how to tell these things, there are plenty of good books which will give you unlimited knowledge, and they can be bought for as little as twenty cents.¹

Do not think that because your daughter or son is safe within the fold of a private school, the wolf of evil, contaminating knowledge, will not be able to come near. I once knew of a little girl of ten who came home to her mother from a

¹ *How to Tell the Story of Life.* By T. W. Shannon, A. M. S. A. Mullikin Publishing Co., Marietta, Ohio.

Three Gifts of Life. By Nellie M. Smith, A. M. Dodd, Mead, & Co., Publishers, New York City.

private school, her eyes big and horrified with what she had been told. The mother to her everlasting satisfaction took the little girl in her arms and told her all she wanted to know. She told her this was a very private and sacred subject and not to be discussed with other little girls, but if ever she wanted to know any more about this subject to come to mother. Mother would be glad to tell her the truth about these things at any time. That because evil-minded people had degraded the mystery of birth, it was no less a beautiful, wonderful thing, in the same way that God is no less holy, because profane people have taken his name in vain.

She has been repaid a thousand times by the absolute confidence of this daughter, who goes to her with all her confidences. One day the mother overheard this remark concerning a very different subject:

"Yes, I know it is true. My mother told me so and my mother has never told me a lie." Hence the everlasting satisfaction. Tell your girls and boys the things they should know. If the father cannot bring himself to talk to his son, ask your family doctor to tell the boy the things he should know for the good of his own health, the health

and happiness of the wife he will some day have, so that his children may grow up with strong bodies and clear minds, and last but not least, for the good of his own soul.

You teach your sons and daughters not to lie or steal, to be courteous and honorable in business, but much more important it is for your sons and daughters and grandchildren-to-be that the knowledge of clean, honorable living be given your children, before it is too late.

When your little daughter sees no reason why she cannot skip the rope on the sidewalk after dark, say to her: "If I left my purse or diamond ring on the walk after dark and someone carried it away, you would feel it was lost through my own carelessness, would you not? How much more careful must I be with my daughter, who is more precious to me than diamonds or anything in the world." If a child feels that she is watched over lovingly, she will not resent it and be disobedient, as she surely will if she thinks she is restricted by arbitrary rules, which she does not understand.

When your little daughter is twelve years old, or even before that, if you think necessary, tell her about the menstrual period, in order that she may

not be frightened if it comes without warning. Before the monthly periods really begin, you will notice a swelling of her breasts. She may not feel as well and will cry easily. Always try to be sympathetic about her troubles, which may seem very trivial to you but which are large to her. Keep her warm and comfortable and give her nourishing food. See that she has plenty of fresh air but no violent exercise, and when the menstruation begins, give her special care and sympathy. If she feels tired, languid, or is in pain, keep her out of school for a day, or until she feels equal to going again. Tuck her up in a big chair or on a couch, with a blanket to keep her warm, give her a warm drink, and place a hot-water bag at her feet. Children at this age will not lie down after they are in a condition to be about. Sometimes they overdo because of their own important concerns or because urged to do so by their elders. Irregular menstrual periods are not always alarming at first, but if not regular by the fifteenth year, the girl should see a doctor. Excessive pain is not necessary and is caused usually by something which can be remedied by medicine or treatment. This should be referred at once to your doctor.

BEFORE THE BABY COMES

Doctor Woods Hutchinson says, "What the mother is, that will the child be. Not only physically but to an extraordinary degree mentally and morally. It is not so much what you do for your children or teach them that counts as what you are. It is far more dramatic for a mother to die for her children than to live for them, but it is not half so good for the children and the maternal self-sacrifice should be balanced by a good wholesome share of intelligent selfishness in order to develop the best type of children. The best mother both in the beginning and in the long run is the one who takes the best care of her own health, of her good looks, and keeps up an intelligent interest in life, so that she may remain the delightful chum and the valued adviser of her children all their lives long."

The old idea that the baby must not be mentioned until he has actually arrived, that all preparation for his coming must be done secretly, as if it

were a disgrace, has gone the way of many other silly notions. To-day when the young wife confides in her friends and tells them that a baby is coming she is congratulated and not condoned with as she would have been twenty years ago. The fashion has changed, which is a lucky thing for the baby, for any flower blossoms best in the sun.

In a well-known text-book on nursing, one remembered by all trained nurses as an important part of their hospital days, Clara Weeks expresses herself as believing that a little knowledge is not a dangerous thing, if that knowledge be real and genuine, and she asks, "If a little knowledge be a dangerous thing, then where is the man who knows enough to be out of danger? The more you know and the more thoroughly you know it, the more will you realize the depth of your own ignorance. The people who know the least about a subject are sometimes the most ready to talk about it and give advice."

When your baby is coming is not the time to listen to neighbors who cheerfully come forward with doleful warnings and advice and stories of what happened to this or that person.

Write to the Children's Bureau, Department of Labor, Washington, D. C., and ask them to send

you the pamphlets called *Prenatal Care* and *Infant Care*. They will be sent you free of charge. Uncle Sam assumes the responsibility of the expense even to the postage. These two pamphlets, written by Mrs. Max West, will give you much advice and the knowledge gained from them will not be a dangerous thing but will fortify you against all the silly superstitions and harmful notions which grow and thrive so amazingly in country places and, sad to say, also in cities, although in the cities the visiting nurse is doing much to exterminate them. Authentic information is what you must have and there is no better way and surely no cheaper than by consulting the books printed by the Government of the United States for the enlightenment of its citizens.

The pamphlet on prenatal care will tell you everything necessary for you to know on this subject. It tells what the expectant mother must do for her own health and the health of her child. What preparation to make for the confinement, what to do in case the doctor does not arrive, also the care of the tiny baby, and much other useful information. It will tell you what to wear (dresses, shoes, underclothes, etc.). As no directions have been given for a wrap for out-

of-door wear, I will tell you about the Liberty Cape. The Liberty Cape was introduced by the Liberty Store in London for use as an evening wrap. This wrap is made of three yards of goods, silk or thin wool for summer, broadcloth or any other heavy cloth for winter. It can be lined as you choose and may be very plain or can be trimmed elaborately, and "a child can make it." Fold the cloth together in the middle, so it will be one and one half yards on the edge, fasten the edges together on one side, fifteen inches from the fold. Open the short edges and put it around the neck. The fifteen-inch part will form a hood-shaped drapery in the back, and the cape will fall in pretty lines around your figure. A large tassel fastened to the point of the hood adds to the attractiveness of the cape.

Your condition is a perfectly normal one and you should not be sick or miserable. If you are not well, see your doctor. Have your husband and other grown-up members of the family and the person who is to care for you during confinement read and study these Government pamphlets. Then in case of an emergency, they will know exactly what to do. If you live on a farm, it is nine chances to one that you are already ac-



BLACK BROADCLOTH LIBERTY CAPE

The collar was made from the corners which were cut from the bottom of the cape. When wide material is used the corners must be cut to correspond with the bottom at the back. Narrow material need not be cut, as it forms pretty, pointed sides. These may be finished with a tassel like the one on the hood, if desired.

quainted with Government pamphlets on fruit trees, pigs, or silos. No good farmer should be ignorant concerning his own wife and child when just as good pamphlets on these subjects can be had for the asking from the government which he helps to support by paying taxes.

The bed for confinement should be made according to directions in the chapter on bed making and all care given the same as for any other sick person. There must be no visitors for a few days. The baby may be looked at but must not be handled. This will break the hearts of some of the friends and neighbors but their suffering will not be as much as the baby's if he is handled, so let them suffer.

Do not spend your time making fancy baby clothes which should not be on your baby at all. Stay out of doors all you can, rest, and read, but sew just as little as you can and yet have your baby sweet and clean. He will be better and so will you. Simple baby clothing is the fashion now and if this fashion has not yet reached your neighborhood, you will be doing a service to womankind and babykind as well by introducing it.

The pamphlet on infant care tells you in simple language how to dress and feed your baby, how

to bathe and air him. So many mothers say, "If only I had known the wise things to do for my baby that are done in these days, he might have been stronger and happier." In those old days people believed in instinct, a marvelous kind of second sight, which was supposed to come to a mother with the birth of her baby and which has been relegated to the scrap heap along with the beliefs in witches, and the healing powers of red flannel. In these days mothers do not sit still and wait for ideas and knowledge to fall upon them like dew from heaven. They go out after it and what is better when once the knowledge is theirs they use it. Now mothers know that babies must have fresh air and short, sensible, clothing. Not a stuffy hot room and beruffled, starched monstrosities called clothing which used to be worn by babies. Send for these two pamphlets and follow their advice. Your doctor will heartily approve and you and your baby will profit amazingly. You have heard the biblical expression, "A Mother in Israel." Julia C. Lathrop, who is the chief of this wonderful bureau, should be called "A Mother in Washington," or perhaps an aunt, as we think of her in connection with Uncle Sam.



AN EASY WAY TO NURSE THE BABY



WASH THE APPLE BEFORE YOU GIVE IT TO YOUR
LITTLE GIRL

LITTLE HELPS FOR THE WEE BABY

Small squares of old linen or muslin placed in the diaper save much unpleasant washing. These little squares catch the stools and can be burned and the diaper put in cold water until you have time to wash it. Do not dry the diapers wet with urine and put on the baby again before washing. It will make his skin sore and give him an unpleasant smell. As quickly as he can sit up alone, get a little china or granite chamber or a little chair and teach him to use it regularly each day. Regular habits can be easily established. Be very careful that he is not left in the chair long enough to tire him. Wash, dry, and powder the baby carefully, each time the diaper is changed. If the baby wakens with a scream, you will find that he has just wet his diaper and you will also find that the skin is sore. Urine scalds the sore skin. This is one of the very important things in the care of a baby and must have constant and careful attention. Bathe and powder and if the skin is red, use vaseline, oxide of zinc ointment, or olive oil.

Cotton is better than linen for diapers. If outing flannel or cotton is used it must be washed

and boiled before using, otherwise it will not be absorbent. Do not put diapers made of rubber cloth on the baby. Use a pad made of cheese-cloth and cotton. This may cover a square of rubber cloth to be put under him in the carriage, in the crib, or even on one's lap, but the rubber cloth diapers must not be used.

One day I saw on the street car a baby buttoned into a coat made like a bag, very much like the one shown on page twenty-one in the pamphlet on infant care. He was the happiest baby I have seen in a long time and no one seemed to think his mother a freak because her baby's hands were in the bag warm and comfortable.

FEET

No wonder our poor feet shriek with pain. They are more abused and neglected than any other part of our body. People who have very good judgment about what they put in their stomachs, seem to have none at all about what they put on their feet. Shoes are not made to fit the feet but the poor feet must bend and twist to fit the shoes. A baby's foot is a pretty thing but how far from being things of beauty are most grown-up feet. The toes overlap each other. The big-toe joint is not smooth and straight but in many cases a howling knob which makes an unsightly lump on the shoe and spoils what would otherwise be a sweet disposition. All because custom says, "Wear pointed toes, high heels, and otherwise make a fool of yourself."

When people insist upon having shoes to fit their feet, the shoe manufacturers will make them that way. Some few manufacturers have begun but there will have to be new patterns and a

great change of heart before comfortable shoes are fashionable. The pointed toes with high heels remind one of little hoofs and with these pointed shoes there is absolutely no way in which the toes can help us in walking. Is it not silly when you stop to think of it, to be so uncomfortable just because someone else wants to be so. This is not such a civilized country as it might be and we have no right to make fun of the Chinese shoes, for our own shoes are just as silly.

The skirts also are either too short or too long, like the Feejee Islanders. The painted faces are like the Africans and the headdresses would disgrace an American Indian. But headdresses are a long way from feet. First have comfortable, well-fitting shoes. Bathe the feet each day and have clean stockings each morning if possible. If you cannot have enough stockings to change so often, wash them out at night and put them on again in the morning.

Cut the nails straight across and if you have corns, callouses, or bunions, go to a chiropodist if possible. Tired and swollen feet should be bathed each day with hot water and soap. Then dip them in cold water or hold them under the cold-water faucet. Rub them with alcohol and witch-

hazel and dust them with talcum powder or corn-starch. Changing the shoes will also give great relief.

One visit to a chiropodist will teach you many things. He will make cushions to take the pressure of your shoes from the tender corn or big-toe joint. He will treat and powder and stick on plasters until you wonder if your shoes will go over them, but when your shoes are once on and you start toward the elevator you will be surprised at the ease with which you walk. You will feel, all at once, as if your fairy god-mother had waved her wand over you and taken away both years and weight. You will feel young, light, and "dancy." While the ministrations of the chiropodist are fresh in your mind, stop at the drug store for a roll of adhesive plaster and at the ten-cent store for a piece of chamois skin. You can get a piece nearly a foot square for ten cents. Select the thickest you can find. When the pads which the chiropodist has put on your feet come off, you can use them as patterns for new ones. You may need two or three thicknesses, if the joints or corns are large. If you cannot go to a chiropodist, get the adhesive plaster and chamois skin, and doctor the sore places yourself. Soak your feet in hot salt and water, then put them in cold

water or pour cold water over them. Trim the corns and callouses carefully with a sharp knife (a sharp knife hurts less than a dull one) being very careful not to cut too deep for you must not have sores on your feet and must not cut deep enough to draw blood. If your big-toe joint is hard and painful you will need to cut a plaster to fit it. If the joint is so enlarged that one thickness of chamois skin is not enough to keep the shoe from hurting, cut two or three thicknesses and sew them together. Do not have lumpy places in the skin or knots in the thread when you sew. When your pad is made, stick it in place with adhesive plaster.

Corn protectors are made in the same way as the pads for the big-toe joints, only they are cut in a different shape. Always be generous with the talcum powder before putting on your stocking. This will not only make the feet comfortable but will keep the plaster from sticking to the stocking. Cut the toenails straight across. If the nail grows into the toe at the edge, cut a little wedged-shape piece from the middle of the top edge of the nail, and the nail will be so busy growing to fill up this little place that it will have no time to grow down at the side.

When the feet are painful, great relief is sometimes gained by soaking them in hot soapy water, rinsing carefully, drying, and rubbing briskly with a good liniment. Wash your hands carefully after using the liniment.

Some people are not comfortable in very low-heeled shoes but the very high heels should never be used for walking. If your feet are swollen in the morning and you have no time during the day to change your shoes, wear lace shoes; then the laces may be tightened as the swelling leaves your feet, keeping the shoe snug. A shoe which slides and twists on the foot is just as harmful as one which is too tight.

Olive oil is recommended for chillblains. The feet must be kept dry and stockings changed frequently. The following prescription for a mixture to relieve the terrible itching and burning, of chillblains is given in the "Beauty Culture" book by William Woodbury.

Burnt alum.....	5 gr.
Iodide of potassium.....	2 gr.
Laudanum.....	2 gr.
Rose pomade.....	5 gr.
Fresh lard.....	3 gr.

Rub the hard or calloused places with vaseline or olive oil, trim them carefully, and use pads to remove the pressure of the shoe. If there are sore places use oxide of zinc ointment. Do not use all kinds of salves or plasters for many times they cause blood poisoning, and then also you can make your own plasters at half the cost. If your feet are painful, visit the best chiropodist you can find and follow his advice.

THE FALLEN ARCH

In the Newark, N. J. Board of Health *Bulletin* No. 22 (1915), Dr. W. S. Disbrow says:

One of the most common superstitions of to-day is known as the "Fallen Arch."

Various conditions have associated to produce this condition of mind, chief of which is the big plaster of Paris foot in the shoe store which calls your attention to the fact that the feet which you thought were in good walking order are in fact flat and ducklike, and that you need supports.

Where you find two or three persons gathered together, you can bet with a great margin of safety that the foot is the subject of discussion, and the relative degrees of deformity of each individual's pedal extremity is considered with the greatest interest.

There is perhaps enough iron and other metals used uselessly in the manufacture of the various so-called supports to build a dreadnought. There are but few families who have no discarded arch

supports somewhere around the house, and the high-priced shoes which go with them you will find in the store-room, useless and abandoned.

There are many cases where careful orthopedic work is imperatively needed. Such cases need the expert as it's a subject for great study—it is no shoe dealer's problem even though extensive advertising would so imply.

There are too many unnecessary supports sold and many, instead of being even to a slight degree helpful are positively harmful. Be sure that your feet won't help you before you encase them with the monstrosities of leather and iron. The chances are that if you can support yourself on the tips of your toes with ease you have all the arch you or anyone else needs for anatomical reasons.

Walk about on the toes for exercise and you will receive more benefit than from all the devices in the market. If you can tip-toe you don't need them.

WHAT TO GIVE IN CASE OF POISONING

If a person has swallowed poison, send for a doctor at once. In the meantime keep cool and do what you can until the doctor arrives.

GAS POISONING

If you waken in the night and find the house filled with coal gas, open all windows and doors and see that all the family are safe. If you get no response from some member of the family, go to him at once. Fill your lungs with fresh air before entering the room and hold your breath as long as possible. If there is much gas in the room, crawl on the floor; there is sometimes less gas near the floor. Take the person who is unconscious from gas poisoning into the fresh air, send for the doctor, loosen the patient's clothing, sprinkle cold water on the patient's face and chest, and give artificial respiration. When the patient has recovered enough to be conscious, give a stimulating drink of coffee or whiskey.

PTOMAINES POISON

If several members of the family become ill at one time, they have probably been poisoned by something in the food, or, as it is commonly called, have ptomaine poisoning. After sending for the doctor, give an emetic (something which causes vomiting) of two teaspoonfuls of salt or mustard in a cup of lukewarm water, every fifteen minutes for three or four doses, or give one to two teaspoonfuls of syrup of ipecac. A drink of warm water before giving the emetic will often make vomiting easier. Then give a dose of castor oil and a stimulating drink of strong coffee or whiskey.

When toadstools have been mistaken for mushrooms, follow the directions given for ptomaine poisoning.

ALCOHOL POISONING

If the patient has alcohol poisoning, give salt and warm water or mustard and warm water and put cold cloths on the head.

AMMONIA POISONING

Give vinegar or lemon juice and a dose of castor oil.

ARSENIC, PARIS GREEN, ROUGH ON RATS, OR OTHER
RAT POISONS

Give white of egg, then give two teaspoonfuls of salt or mustard in one cup of lukewarm water, every fifteen minutes until four doses have been given.

CARBOLIC ACID

Wash mouth with pure alcohol, give a quarter of a glass of alcohol and water, equal parts. Use about half of this amount for a child. In five minutes give two teaspoonfuls of epsom salts dissolved in a little water. Give raw eggs, castor or sweet oil, and a milk diet.

IODINE

Give flour or starch in water, followed by two teaspoonfuls of salt or mustard in a cup of warm water every fifteen minutes for three or four doses.

LEAD POISONING

Take white of egg or milk, followed by two teaspoonfuls of salt or mustard in a cup of luke-

warm water every fifteen minutes for three or four doses and then give two tablespoonfuls of epsom salts dissolved in a little soda water.

LIME, LYE, OR POTASH

Give vinegar or lemon juice, followed by a dose of castor oil.

BICHLORIDE OF MERCURY, CORROSIVE SUBLIMATE, AND CALOMEL

Give white of egg, followed by two teaspoonfuls of salt or mustard in a cup of lukewarm water every fifteen minutes for three or four doses.

MORPHINE, OPIUM, OR STRYCHNINE

Give two teaspoonfuls of salt or mustard in a cup of lukewarm water and give drinks of lukewarm water. Repeat every fifteen minutes until the patient vomits freely. Then give strong coffee or other stimulant. Try to arouse the patient. Talk to him and slap him with a cold wet wash cloth or towel. This will seem cruel but he must be aroused. Give artificial respiration and be sure to keep the patient awake.

OXALIC ACID

Take white of egg or lime water, followed by aromatic spirits of ammonia and frequent drinks of baking soda, one teaspoonful to a glass.

PHENACETINE OR HEADACHE POWDER

Take two teaspoonfuls of salt or mustard in a cup of warm water every fifteen minutes until the patient vomits. The patient must lie down and have stimulating drinks, hot water bags and if necessary artificial respiration.

HOMEMADE ARTICLES

HOW TO MAKE A BEDPAN

If a bedpan cannot be obtained, take a shallow wooden box, twelve inches wide, eighteen inches long and three or three and one half inches high. Saw down the sides of the box six inches from the end, remove the longest side pieces and the end. Take the side pieces which you have just removed and nail these on top of the side pieces remaining on the box, thus making a cover. Tack a cleat of wood on the bottom of the box even with the edge of the cover. Put in place a ten-cent wash basin or tin pan and you will have a good bedpan, which can be used for either a douche or a bedpan.

This can be scrubbed and put in the sun if soiled. A thick towel must be folded and laid across the top where the hips rest. If the bedpan tires the patient, place a small pillow under the back, close to the box. The cleat is to keep



FRAME FOR HOMEMADE BEDPAN MADE FROM A SHALLOW BOX



THE FRAME WITH PAN AND TOWEL IN PLACE

the basin from sliding under the top when the patient is using it, as the weight of the patient will tip the box.

A SUBSTITUTE FOR A RUBBER SHEET

If you have no rubber sheet, make a protection for your bed with a table oilcloth, or flour sacks, or newspapers. If you use paper tack on a smooth thick layer of cotton and cover it with a piece of muslin or cheesecloth, making a thick pad. This can be placed under the drawsheet and will be a great protection. If the patient is unconscious or the bowels move without warning, it is well to keep such a pad under the hips. It will save moving the patient about to change the sheet and also saves laundry. If this pad becomes wet it must be burned. Always have an extra one on hand.

A BED TABLE

When lying in bed it is very hard to feed oneself from a tray placed on a table or chair by the side of the bed. It is one sided and awkward and the food is often spilled on both the patient and the

bed. Take a wooden box, ten or twelve inches high, two feet long, one foot or more wide. Knock off the sides of the box, leaving a little table.


If the end boards are thick it will be strong enough: if not, nail on little braces.


An orange crate has been found satisfactory for this kind of a table.

Spread a towel on this table and set it over your patient's lap. She will be able to eat or write with great comfort.

A BOOK REST

If your patient wishes to read, she will find holding a book very tiresome for weak hands and arms. Take pieces eight inches wide, from the sides of the box from which you made your table, nail them together at right angles like this:

 then nail a strip, a couple of inches wide

on the edge of one piece, like this:  and

you have a book rest. Place on the little table

like this:





AN ICE CAP MADE FROM TABLE OILCLOTH
RING MADE OF ABSORBENT COTTON AND WOUND
WITH BANDAGES OR STRIPS OF CLOTH



AN EASY WAY TO SHADE THE LIGHT

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Fasten a screw eye on the back of the table and a hook like those used on screen doors to the back of the book rest. This will keep the rest in place, and make a strong support for books or magazines.

AN ICE CAP

When an ice cap is needed and one is not near a drug store or for any reason cannot get one, you may be able to get a bladder from the market. Clean this thoroughly and it will make a very good ice cap. If you do not care to use the bladder and you have a table oilcloth, cut a piece of this about eighteen inches square. Break the ice in pieces about the size of an English walnut. Two teacupfuls of ice is enough. If there is too much the bag will be heavy and full and will not fit over the head or inflamed place. Put the ice in the center of the oilcloth, the rubber side inside, lay a ring of absorbent cotton about the thickness of your thumb around the ice, and also a piece on top. This will absorb the water as the ice melts and keep the patient dry. The top of the bag should be tight. Gather up the edges of the oilcloth and tie a strong string around the bag below your hand, keeping the bag soft and flat.

ODDS AND ENDS

Paper straws from a soda fountain or wheat straws from the barn do very well in place of glass drinking tubes.

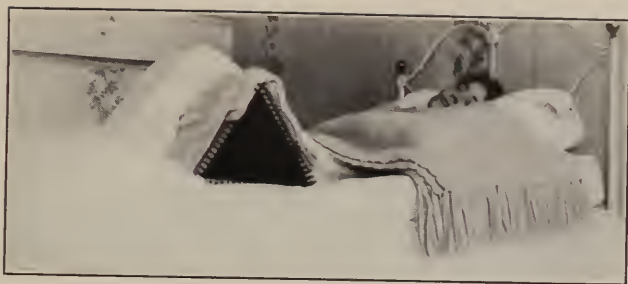
A little cream jug with a long spout can be used for a drinking cup.

A bag of clean sand will do for a hot-water bag and will remain hot a long time. Use strong muslin for the bag and fill it only half full. Heat this in the oven or near the stove. Have two bags. One can be heating while the other is in use. This is more convenient to use during the night than jars of water.

When pillows are few, make a homemade knee rest. Make with three boards, two feet long and one foot wide. Lay a thin pillow or folded quilt over this.

The lamp shade must not be made of paper as it might burn. Use a piece of tin and a wire hairpin.

A straight-legged chair turned upside down, with a pillow or two, makes a comfortable rest for the back when your patient sits up in bed.



IF YOU HAVE FEW PILLOWS MAKE A KNEE REST FROM A BOX



CRADLE FOR BROKEN LEG, MADE FROM A HAT BOX. SMALL
RING UNDER HEEL

Barrel hoops cut in half and fastened together with pieces of lath or little boards, will keep the bed clothing from being heavy over a broken leg.

A square cardboard hat box will answer the same purpose. Cut openings in opposite sides of the box, large enough to set over the leg. I made one like this for a little girl and printed the name "Fido," over the opening. We played that her broken leg was Fido, and that he must stay in his house for some time. When the leg ached she said Fido was growling. Sometimes it ached so hard she had to bark for him.

A very nice way to carry offerings to a sick person is on a little paper or wooden plate, covered with a paper doily. Then if it is a busy household, the plates need not be returned.

NUISANCES

It is not good housekeeping to have rats and mice in your house; neither is it sanitary. Who would allow the horse, cow, or dog to walk about on the pantry shelves, and yet without doubt they would not have walked in the filthy places through which mice and rats scamper. Rats and mice can always be disposed of, if gone after systematically. After running through all kinds of filthy places, they hold family picnics on your pantry shelves or in the cupboard, gnawing your food and contaminating your house. Make it a rule never to leave things which will attract them. Anything good for food should be covered or protected and anything not fit for food has no right to a place in your pantry or cellar. Put it in the garbage can and see that the cover fits tightly.

Save all your old newspapers to be used for a lining for the garbage can. Then, when the can is empty, it is a very easy matter to clean it with some disinfectant and hot water.

If you poison rats, put the poison out of doors. Make holes in the sides of a box, near the top. The holes must be large enough for rats to go through. Spread poison on bread or any food which you think they will eat. Put the bread on the ground and turn the box over it, upside down. Lay a heavy stone on the box so nothing can push it over. Then the chickens, dog, or children will not be poisoned.

Roaches are as bad as mice, playing tag over your kitchen tables and sink, leaving germs of all kinds from those regions of darkness to which they make off in a hurry when you appear. Powdered sugar and borax in equal parts, scattered over the table and sink or wherever they come, is a great discourager and a refreshment which is not at all healthy for them. The table and sink must be thoroughly dried and no water left where they can get at it.

Sometimes in crowded street cars, trains, or at the movies, one carries home more than he started out with. In other words a bed bug. You may be fortunate enough to catch this little, round smelly party before she has begun to raise a family in your house and then again you may not. One of the children will announce that he has a mosquito

bite and your trouble has begun. Hunt through the beds carefully and you may be able to catch them all. With an old atomizer or a little garden spray used to kill lice and bugs on the plants, you can spray your bed. The fine spray will enter the smallest crack. Use corrosive sublimate; strength, one part of corrosive sublimate to one thousand parts water. The druggist will tell you how to make it. As soon as you finish spraying, put the things where the children cannot get them, for they will want to play with the spray. After the bugs are all gone, do not keep the poison which remains. Pour it into the water-closet where nothing can get at it. Gasoline can be used as a spray but it must not be used in the house for fear of fire.

Everyone knows nowadays that no matter how much we dislike the mosquito, we do not hate him half enough. He is a pirate, a traitor of the worst kind. He comes singing around in a casual way and the moment we are off our guard, he gives us a nip. He takes our blood to fill his own body but always gives us something in return—yellow fever and malaria—to say nothing of the irritating lump which itches and itches and keeps us angry and busy for some time. Screen your

house carefully. If you cannot have wire screens, buy mosquito netting by the yard at the department store. Buy black netting, and if it is neatly stretched on a frame or on the outside of the window, it closely resembles wire netting. Get the finest mesh to be had and tack it over the entire window frame; otherwise the mosquito will manage to get in between the sashes when the window is raised if there is the smallest crack. If one does get in, catch him. Choose a stick which will reach to the ceiling and tie a tin cup to the end. In the cup, put a little kerosene oil and strong camphor, or oil of lavender with alcohol. Hold the cup under the mosquito. The fumes of the kerosene will stupify the gentleman and he will fall into the cup. This is a cleaner way than smashing him on the wall paper and making an unsightly spot. Have no pails, pans, or tubs with water in them, standing around your yard. These are the home, sweet home of the mosquito. Pick up everything which may hold water after a rain and dispose of it. Quite a flourishing colony of mosquitoes might breed in an old tomato can thrown out and forgotten. Filled with rain and warmed by the sun, even an old tomato can has its possibilities for harm.

Some day your daughter will come home from school and say, "Teacher said, 'ask your mothers to comb your hair.'" You may find game when you go on this hunting expedition and you may not. If you do, rub kerosene oil and olive oil, in equal parts, into the hair and scalp, or if you are near a drug store, a pleasanter remedy is an alcoholic solution of larkspur. Wet the hair with this and tie up overnight in a towel or cloth. Comb every day with a fine-toothed comb to be sure they are all gone. Repeat the treatment if necessary. Warm vinegar will remove the nits or eggs, then wash the hair with warm soap and water. It is no disgrace to get these little pests. The only disgrace is in harboring them. Almost all children, especially girls with long hair, have them sometime during their school days and many of us can remember how our scalps smarted from the vigorous treatment given by our mothers, and also the firm, tight braids looped back of each ear, worn that way to guard against further contamination.

KEEPING WELL

Your happiness, the happiness of the family, and your ability to do your work, depend upon your health. If you have fresh air and sunshine, your food may be very simple if well cooked. Each time you breathe you throw off waste material from the body and poison the air. So have plenty of fresh air and do not breathe over and over again the air in a room which is tightly closed. You have been many times in halls, theaters, or churches where the air was heavy and bad and you remember what a relief it was to get out of doors and draw a long breath. The clean air in that room had been exhausted by the many people breathing it and only the dirty heavy air filled with the cast-off material from so many bodies was left. Make it a rule to air all of your rooms often and always sleep with your bedroom windows open.

In Russia I am told the people seal their windows in winter to keep out the cold, so of course they

must keep in the bad air. We will go to Russia in the summer. Many trained nurses tell of houses where the bedroom windows are nailed down. Someone has said, the reason there is so much fresh air in the country, is because the farmers have all the bad air in their bedrooms. But the farmers are not the only foolish ones and they have the advantage of plenty of fresh air in the day time. Many people do not realize that it is just as bad for one's health and, to an enlightened person, just as repulsive to breathe foul air as it would be to eat from a garbage can.

Do not wear heavy underclothing. Two thin garments are warmer than one heavy one. Sometimes one sees woolen underclothes, which are as thick as boards and about as porous. It has been discovered in this generation, that large mesh underclothing is enough for winter and people who have worn heavy woolen underclothes every winter for years, are perfectly comfortable with the thinner ones through which the air can circulate. Take more baths and wear less clothing.

Keep your house 68° to 70° F. Have you never heard people say, "The room is so hot, it makes me sleepy." This person was not sleepy, he was just being poisoned by air, which had been heated

and breathed too much. People who live in such an atmosphere are always catching cold and calling the doctor. They catch cold because their vitality is low, made weak by the bad, hot air, therefore the first lively germ which they meet is stronger than they and they get the worst of the fight. Well people do not take colds or other diseases as easily as those who have become weakened and in condition where they are not able to fight back when a germ tries to get them.

This is a true conversation which took place one morning in October.

Old Patient: "Good-morning doctor, how is business?"

Doctor: "Poor, poor, nothing doing. But you just wait until next month, when people shut up their houses and stir up their fires, and I will be busy night and day."

- Consumptives in sanitariums are made to sleep out of doors. Sometimes it is so cold they must have sleeping-bags and hot-water bottles and the nurse goes about from one patient to another to be sure no one's nose freezes. If so much fresh, cold air will cure a sick person is there any good reason for thinking the same treatment will not keep him well?

Sleep is nature's greatest builder. The tiny baby who sleeps most of the time is growing, being built into a man by sleep which lays cell upon cell in all parts of the little body to build the house of his soul, just as the mason lays brick upon brick to build the walls of the house for his body.

Sleep is a healer as well. It heals and rests tired bodies and minds. You remember how you have gone to bed at night troubled by something almost too hard to bear, and how in the morning you felt able to meet it. It was not because of the sunlight, as many people think, but because your tired brain had been healed and rested by sleep and a rested brain is able to see a way out of difficulties which a tired one would never find. The same way with your body. If you are tired or sleepy and feel you need sleep, sleep as long as you can. Be sure the sleepy feeling is not caused by bad air or by constipation, but with your windows wide open, sleep until you can sleep no longer. You are not lazy and your body would not demand this sleep if it were not needed. Not everyone can take the time for extra sleep, but if you can, try to regard it in the same way you would a tonic. No one would think of calling you lazy if you had a bottle of

beef, iron, and wine and took it religiously three times a day, but I heard a druggist say that particular medicine was just about as efficient as so much canal water.

Sleep is considered better than medicine many times for sick people and it is a wonderful doctor. What you might call a beauty doctor. So consider the little extra naps as doses of a tonic which will do you more good than drugs. Women need more sleep than men, and children need most of all. It is as silly to limit the hours of sleep as to limit the number of your baths or the amount of nourishing food. If you send your children away to school, find one where long hours for sleep are given. Early rising for children and young people when still sleepy is not what the old rhyme says. It may make some wealthy, but it will be at the cost of their health and show lack of wisdom on the part of their parents. If children go to bed at a reasonable hour they will not want to stay in bed in the morning after the needed rest is gained. If you want John to get up and fill the wood-box, bring coal from the cellar, or sweep the walk before breakfast tell him so and see that he goes to bed in time to get plenty of sleep, but do not call up the stairs and in a goody, goody

voice say, "Hurry John, the early bird gets the worm." No wonder John will growl and say, "Serves the old worm right. He needn't have gone out so early."

Sleep to do any good must be natural and refreshing with plenty of fresh air. A stupor induced by drugs will not do. Often a walk just before bedtime will induce sleep, a bath, a glass of hot milk or hot lemonade and a cracker, or reading, not a blood-and-thunder tale or some yarn of detective prowess or mystery, but a comfortable little story which takes your mind from yourself and yet does not put your mind in a stew which lasts after you get in bed. And by the way, have as comfortable a bed as you can afford. Do not spend money, if you have little to spend, on a gay shiny brass bed or a beautifully grained mahogany one and scrimp on your mattress. Buy an iron bed painted white, good woven wire springs, and a comfortable mattress. Many people have a superstition that a hair mattress is the only thing to sleep on and be comfortable, but there are many mattresses which are luxuriously comfortable and have not one hair in them. You could buy two or three of these for what you would pay for one of hair.

Put a quilted pad over the mattress or a pad made of cotton and covered with cheesecloth and quilted or tied like a comfortable. If tied closely this can be washed without being lumpy. Then put on your under sheet and make your bed tight and smooth as directed in making beds for sick people, and you will sleep like a prince and be fit as a fiddle in the morning.

Take a bath every day if you can manage it. You will feel like the king of a happy country or a Democratic alderman in a Tammany District, so much does it add to your self-respect and feeling of security. A man or woman either, who has a daily bath, will be careful about other rules of health. They will not be contented to be poisoned by constipation, to have dirty teeth, or bad breath. It is one of the best of the many good habits to form. It need not necessarily be a tub bath for even yet with all our modern houses and sanitary arrangements, many people have no regular bath room. Neither must the bath be taken in the morning. Even in the farmhouse where the bedrooms are cold, one can hang a sheet over the clotheshorse near the kitchen stove and with a tin bath pan, a little tub, or even a pail get a very good bath. Have the tub or pail large

enough to hold the feet and even if you are tired when you begin, you will be surprised to see how much better you will feel and how you will sleep. A cold sponge or shower after the bath hardens one and makes the skin glow. People who do this daily seldom have colds. Cold water does not seem as cold if used after a warm bath as when applied to the dry skin. Many people shrink at the thought of cold water, but revel in it after screwing up their courage to the "trying it" point. Delicate or sick people should not take cold baths without consulting the doctor. Keep a flatiron on the back of the kitchen stove in winter and if your bedroom is cold open the bed and iron the sheets with the warm iron. It takes only a minute. Then if you have had a nice bath and a rub with a rough towel, open your windows, and hop into your comfortable bed. Your clean skin glowing and your heart like a little steam engine will be pumping blood to all parts of your body and back to your lungs to be bathed in the clean air which you are breathing. This is the way to get ready for a good day's work, the way to avoid headaches and heavy feelings in the morning. If any one does this for a week, I think it would take a large bribe to get him to go back to sleeping

with the register open, his window closed or only open a crack, and a bath on Saturday night. If you feel you must sleep in underclothes always have one suit for day and another for night. There is a deadly fear, a superstitious dread of baths in some quarters. When I politely hinted to a maid that she was more than welcome to use the tub in her bathroom, that it was there expressly for her comfort and convenience, I was gravely told that her mother had warned her not to use it too often, as baths were very weakening. I pointed out to her the sturdy people whom we both knew, who took daily baths. Still the dread of the tub was stronger than my arguments. Bathing is certainly a result of education.

You would not eat from unwashed dishes or with a fork which was jealously guarding between its tines bits of food left over from the last meal. You would be very much disgusted and make pointed remarks to the dishwasher, but is that any worse than having bits of food left in and between your teeth from one meal to the next or overnight. Your mouth is warm and moist and should be dark, therefore an ideal place for germs to grow. Clean your teeth regularly and if one shows signs of decay, go to the dentist at once.

If the children have toothache take them to the dentist. Teeth do not ache for the fun of it and it is not entertaining for any one concerned, so go to the dentist whether you can afford it or not. You might better have fewer clothes and go to bed while they are being washed, than save money on your teeth. Bad breath because of decay, indigestion because the food is not well masticated, and many other ills, come from neglected teeth.

Keep clean outside and in. Clean skin, clean teeth, and clean bowels, then your mind will be bright and alert, you will have the respect of your family, your friends, and yourself. Besides it is a very old saying that cleanliness is next to godliness. In some places, we know it is next to impossible, but a clean body helps to keep a clean mind. Dirty people many times brace up and do not seem like their old selves when once they are clean. A young man was brought into the hospital. He had been working in a very dirty place and had never indulged in many baths. After the orderly had given him a bath I washed his hair and cleaned his fingernails. Neither of these things had happened to him before in all his twenty years. He was a constant delight and source of entertainment to himself. I would see

him feeling of his hair and inspecting his nails hundreds of times each day. He was so much in love with the improved appearance of his nails that he would polish and file them himself and displayed them to his friends who called, saying, "Look at me nails. I'm the swell I'm telling ye." He enjoyed being clean so much that I had faith to believe that it might last after he left the hospital. He felt he had progressed in the social scale because he was clean. I know it improved his manners, for he began saying, "Please" and "Thank you," without prompting. Nurses in a busy hospital have no time, neither is it their duty, to scrub their patients' manners, but they do scrub their bodies and it seems to do for both.

Move your bowels each day. If you have chronic constipation eat food which will correct it. Do not give up and say, "Nothing will help me," but keep at it, for something surely will help you.

After the delicate and wonderful machinery of your body has absorbed all the strength-giving properties of your food, there is left in the intestines a mass of waste material which should be disposed of each day. You know how distressed you are if the garbage man fails to come and the garbage must be left to decay and be obnoxious

in the can until the next day for collecting comes. How much worse to be carrying about in your body a decomposing mass of waste material from which everything of use to you has been taken and which will poison you, making you stupid and ill. Eat relaxing foods, bran bread, graham bread, fruit, and vegetables and if you cannot regulate yourself with a diet take medicine. Something recommended by your doctor, not your druggist. The doctor knows your individual peculiarities and a drug which would be splendid for your father or your neighbor might not be at all the thing for you. Then take the medicine as the doctor orders. Many people rush to the doctor's office and get two or three kinds of pills and tablets. They take two or three doses as ordered then they skip a few doses and say, "I don't believe it will help me anyway, what's the use of taking it." In hundreds of houses there are dozens of little envelopes, small bottles or boxes, from which only two or three doses have been taken. This is the worst kind of foolishness. For the person doing this cheats only himself and wastes his money. Do not go to the doctor unless you need his advice and then take what he gives you in the way he directs. Walking is helpful for constipation, but when you

go out to walk do not dawdle along in a lackadaisical way, but walk as if you were going on important business, with your chin up and your shoulders straight.

If you live in the country and have a well, take care of it; that is, the well must not be where it can get drainage from an outside closet, a cess-pool, or a barnyard. Do not throw waste water near it. A supply of pure water is one of the ways of saving doctor's bills. Of course we want the doctors to be comfortable, but self-preservation is the first law of nature. The people who neglect their health and stick to old worn-out, antiquated ideas of not too many baths in the winter, fear of airing the house because of taking cold, heavy thick underclothes night and day, letting nature take her course with constipation, and a sentimental regard for the "poor little fly whom everyone is down on," are the ones who are always under the doctor's care, or should be. In China the doctors are paid while their patients are well, but in order to keep them well in this country the doctors would have to employ policemen for some families, and families who do not consider themselves ignorant either.

There is an illuminating portrait of a fly in one

of the Red Cross textbooks. He looks like a horse which has been walking through very deep sticky mud, but it is only a fly enlarged to show the germs on his legs. The germs which he has collected in dirt and filth and which he leaves behind when he walks over the dining-room table, the butter, the sugar, the food being prepared in the kitchen, and on your helpless little baby's face. Do not have uncovered manure heaps, uncovered garbage cans, and unsanitary outside closets where he can breed and if he does get in see that he does not get out alive. Be absolutely relentless and bloodthirsty where the fly is concerned for he is not only a thief in the night but he is a spoiler by day. He deserves no consideration excepting that which is used to hasten his extermination.

No healthy person will be in a chronic tired condition. If you are tired and cannot get rested with a reasonable amount of sleep or if you cannot sleep, the time has come when you had better see a doctor.

There are unfortunate people who never get a vacation but everyone should have a regular rest from work and a change. It is a good thing sometimes to get away from your own family.

Two ailing tired members of one family should not go away together. They carry their atmosphere with them. Let one go east and the other west or the one who needs it most go, and the other stay at home. It will be much more of a benefit to both. One naturally hesitates to relate his aches, pains, and bad feelings to a stranger, while to a relative, the woes are handed over unsparingly.

Many people still have the notion that it is a little superior not to be able to do things, that it is a little more refined to have a heart complication or something that will let you out of doing your share in the world, while in reality they are only poor stuff. If the time ever comes when it is popularly considered as bad to be a little "off" in the liver, as in the head, you will see the livers pick up and behave themselves, for they will be taken care of as they should be. No one would care to have his acquaintances shake their heads, raise their eyebrows, and with a shrug of the shoulders, say "Liver."

Health is not only wealth, but beauty and happiness as well.

All are creatures of habit either good or bad, pleasant or unpleasant. Smile at the world and

you are more than likely to get a smile in return. Who does not return the smile of the happy, trusting baby? Of course we cannot go about the streets grinning like a Cheshire cat, but when the baby looks at you, smile at him. He will smile in return, roll over on the floor or in his crib, and feel happy. You can work just as fast and just as hard with a pleasant expression and not be as tired when you are through as if every nerve in your body was on edge, and your face all screwed into wrinkles. Smile at the children and at your husband and see that they smile at you.

A family can just as well cultivate a cheerful atmosphere as a cold unhappy one and everybody's digestion will be better for it. Tell funny stories at the table and laugh all you can. Do not allow unpleasant family affairs to be discussed at the table or before the children. If one of the children needs scolding, do it after dinner and not before the others. If you wait until after dinner you may change your mind, and not scold at all. Don't talk about the cost of butter. Put what you can afford on the table and say, "This is all the butter we can have for this meal," and let it go at that. Do not lay grown-up troubles on children. They carry unpleasant things in their

minds long after you have forgotten all about it. Do not get so tired cooking a big dinner, that you cannot enjoy it yourself or let the others do so. The mother of the family should be selfish enough to look out a little for herself. The wise Psalmist said, "Better a dinner of herbs where love is, than a stalled ox and hatred therewith." In our day he would say, "Better a supper of mush and milk and happiness, than a mother cross and tired and a dinner of biscuits and fried chicken."

Cultivate a sense of proportion. You should weep for the death of one whom you love, but only a foolish person and one who does not understand true values in this world will cry over broken china, torn clothes, or spilled milk. No one breaks dishes out of pure "cussedness," so if daughter breaks one, when washing them, don't scold and make her feel she has broken all the ten commandments as well as the old teacup, but tell her that dishes are expensive and request her to be careful. She will nine times out of ten be more sorry than if scolded soundly.

If you find your nerves are all coming to the surface and feel as if you would have to slap someone to relieve yourself, don't call Johnnie in and vent it on him, but go in your bedroom and with

the windows open, lie flat on your back ten minutes, if you cannot stay longer, and relax your muscles. Not everyone knows how to relax. Do not lie on your back with your eyes closed tightly, your teeth gripped together, and your face worried, but begin at your head and tell it to rest. Let go all your muscles one at a time; don't laugh at this, try it. You may not do this the first time, but you will after a while. Let your arms lie at your sides, not rigid, but let them lie heavy on the bed, and all your body the same, and no matter how unpleasant you feel, look pleasant. Smile to yourself; try it. None of the children or family must come in while you are having this little rest. It is yours for yourself and must be respected.

Dirt of one kind or another is responsible for most of our ills. Dirty food, dirty milk caused by dirty cows and slovenly milkers, dirt in the water and in the air. Have screens in the kitchen windows and doors, scald the bread-box and dry it in the sun. Never leave decaying fruit or vegetables in the cellar. Clean it well and whitewash it early every spring. When buying fish or meat, use your nose as well as your eyes and if your nose, like a railroad-crossing sign, shouts "danger, bad

smell," go to another market or cook eggs. Wash the pretty red apple before you give it to your little girl. The apple is good for her but the germs which are on the outside are not. Use the apple to nourish the child and not the child to nourish the germs.

The windows closed, a heated room,
Red flannel in array,
"That snuffy child," the walrus said,
"Has been in doors all day."
"How sad," remarked the carpenter,
"So many do that way."

DIET FOR CHILDREN

One time in the middle of the winter, I visited my friend, Miss Emma McGall, who was, at that time, superintendent of the Orthopedic Hospital of Orange, New Jersey. The little crippled children under her care, had not been out of doors for many weeks. Remembering the thin, pitiful, little people whom I had seen in hospitals, I almost dreaded meeting them. After breakfast, I was taken to the nursery dining-room by the proud foster-mother-superintendent. She was greeted with shouts and one tiny chap even called her, "mother." A poor little Italian, with crooked legs, raised his dark eyes to her face, patted her hand, and said, "I have a like." In spite of the crooked legs and backs, the club feet, and other deformities, they were as rosy and happy as any other family of children. "How do you keep them so well?" I asked. "By giving them proper food, and keeping them busy," she replied.

The little cripples who were fastened on

frames, in order that their poor crooked bodies might grow straight, had little lessons each day. They wove baskets, sewed, and learned to do many things and were kept happy by the wise woman who, like a fairy god-mother in a white gown, went in and out and up and down stairs a hundred times each day, directing, nursing, comforting, and looking after the food, which is such an important item in the well-being of healthy children who can be out of doors each day, and doubly so in the case of little cripples who must be carried out, even in the summer. I knew a diet which would give firm flesh and rosy cheeks to crippled children would surely do as much for those whose legs could carry them about, so I asked Miss McGall for her diet list. This is what she said. "Give them plenty of orange juice; also give nuts, raisins, bran bread, figs, dates, and honey."

MEALS FOR THREE DAYS

<i>Breakfast</i>	<i>Dinner</i>	<i>Supper</i>
Stewed prunes	Boiled chicken	Milk toast
Cream farina	Mashed potatoes	Baked apple
Boiled eggs	Creamed string beans	
Cocoa	Bread and butter	
	Chocolate corn starch desert	

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<i>Breakfast</i>	<i>Dinner</i>	<i>Supper</i>
Oranges	Lamb chops	Boiled rice with
Hominy	Baked potatoes	thin cream and
Scrambled eggs	Spinach	sugar
Milk	Bread and butter	Stewed peaches
	Baked tapioca with jelly	
Apple sauce	Broiled steak	Celery soup
Oatmeal	Mashed potatoes	Bread and butter
Poached eggs	Peas	Jam
Milk	Bread and butter	
	Baked apple	

MEALS FOR ONE WEEK

SUNDAY

Cream of wheat	Boiled chicken	Toast and milk
Bread and butter	Mashed potatoes	Jelly or fruit
Scrambled eggs	Creamed onions	
Milk	Chocolate pudding	

MONDAY

Oatmeal	Lamb stew and bread	Hot milk and toast
Boiled eggs	Crumb pudding	Prunes
Milk	Mashed potatoes	
Bread and butter	Creamed turnips	
	Baked apple and cream	

TUESDAY

Oatmeal	Beef stew	Boiled rice and
Boiled eggs	Potatoes	milk
Milk	Bread and butter	Bread and butter
Bread and butter	Cornstarch pudding with	Fruit
	fruit sauce	

WEDNESDAY

<i>Breakfast</i>	<i>Dinner</i>	<i>Supper</i>
Hominy	Roast beef	Bread and butter
Scrambled eggs	Mashed potatoes	Sauce or fruit
Bread and butter	Creamed carrots	Milk
Milk	Jelly	

THURSDAY

Cream of wheat	Roast lamb	Toast and milk
Boiled eggs	Baked potatoes	Animal crackers
Bread and butter	Spinach	Jelly
Milk	Bread and butter	
	Baked custard and peaches	

FRIDAY

Hominy	Lamb stew	Toast
Graham toast	Potatoes	Cocoa
Boiled eggs	Baked lemon pudding	Crackers
Milk	with fruit sauce	Jelly or fruit

SATURDAY

Oatmeal	Broiled steak	Bread and butter
Eggs	Boiled rice in peppers	Milk
Bread and butter	Baked apple	Crackers and fruit

WHAT TO FEED YOUR PATIENT

In the hospital where I was trained years ago there was no shining diet kitchen, no place where nurses might weigh and measure, cook and serve for their patients, but the senior class was marshalled, periodically, by Sister Alexia, to the hospital kitchen, where we cooked on the great range and mixed and brewed at the long table. These cooking classes were always considered a lark. They were held in the evening after the supper work was done and had a little of the spirit of adventure, for none of us cared to venture to the kitchen during the day. At that time it was under the rule of the fat but none too amiable cook, Julia. How clean and shining everything was in the big kitchen and how we all loved dear Sister Alexia! She was an ideal cooking teacher, for, while we must learn all about gruels and other foods which had nourishment for their only recommendation, still we were obliged

to make only a little of these uninteresting dishes, while if any really good things were being cooked, there was enough made so all might taste, and best of all, someone was taught to make ice cream at each lesson.

Sister Alexia taught from the *Invalid Cookery Book* of the Boston Cooking School, using many of the rules which are given here.

Preparation of food is a most important part in the care of an invalid. The proper kind and amount of food gives strength and helps greatly the recovery of your patient, while too much food, or the wrong kind of food will, many times, cause relapse and sometimes death.

Diets for ordinary cases are of three kinds—liquid, light, and convalescent. When a patient is having what is called a regular diet it is best to be careful and give a convalescent diet, for many foods are hard to digest and should not be given to a person who must stay in bed.

If a member of the family is sick give milk, broth, or gruel but no solid food until the doctor has seen your patient and ordered a diet for him.

Food must not only be nourishing but should taste good and look attractive. Do not forget

the tiny pinch of salt in the gruel or beef tea; do not butter the toast in the center and leave the crust without butter. Toast is much daintier if the crusts are removed before toasting. A small leaf of lettuce, a nasturtium leaf or a thin slice of lemon add to the attractiveness of the tray dinner and make it more appetizing. Have as great a variety as your purse and your doctor will allow. Taste the food you give your patient but not with *his* fork or spoon.

When serving cold drinks or cold liquid food, carry it to your patient in a glass set on a plate; use a cup and saucer for hot drinks or hot liquid food. The patient will take the gruel much hotter if given a spoon to sip the first mouthfuls. Place the spoon on the plate or saucer, not in the glass or cup, when carrying to your patient. A small tray is convenient. If you are serving a glass of eggnog, place the glass on the tray with a glass of cold water and a spoon. If your patient does not drink from a glass, take in place of the spoon a drinking cup, a glass tube, or a straw. Always give a drink of cold water after serving eggnog, milk, cocoa, beef tea, etc., as the mouth becomes very "bad tasting" and unpleasant, especially in fevers.

DRINKS FOR SPECIAL CASES

BARLEY WATER. Look over carefully and soak overnight or for several hours, $1\frac{1}{2}$ table-spoons barley. Add to 1 quart cold water and boil for $1\frac{1}{2}$ hours. Strain and add salt, lemon juice, and sugar, or cream in place of lemon juice. Serve hot. This drink is **NUTRITIOUS**. May be given with milk.

RICE WATER. Cook 1 tablespoon of rice in 1 pint of cold water until the rice is very soft. Strain and thin with milk to make a nice drink, season with salt, and serve hot. This can be used for **DIARRHŒA**. A small piece of cinnamon boiled with the rice will add to the medicinal value.

OATMEAL WATER. Add 1 cup fine oatmeal to 2 quarts of water which has been boiled and cooled. Put this in a warm place (shelf over the top of cook stove, over a radiator or register) for $1\frac{1}{2}$ hours. Strain and cool. Useful for **CONSTIPATION**. May be given with milk.

APPLE WATER. Pare and core 1 large sour apple, put 1 teaspoon of sugar in the cavity and

bake until very soft, pour water over it, and let stand for a half-hour, then strain. This may be given to patients having great THIRST or for CONSTIPATION.

FLAXSEED LEMONADE. Look over 1 tablespoon whole flaxseed, taking care to remove the black grains. Pour over this 1 pint of boiling water and boil for 1 hour. Strain and add sugar and lemon juice to taste. Serve either hot or cold. This is used in case of CROUP, or IRRITATION OF THROAT.

COCOA CORDIAL. Mix 1 teaspoon of cocoa and 1 teaspoon of sugar. Have ready $\frac{1}{2}$ cup boiling water. Add enough water to the cocoa to form a paste, then stir in remainder of water and boil 1 minute. Add $1\frac{1}{2}$ table-spoons of port wine. Use this in case of CHILL, EXPOSURE, or EXHAUSTION.

TOAST WATER. Toast 2 or 3 slices of old bread slowly and quite brown but not burned. Break in pieces and cover with 1 pint of cold water, let stand 1 hour, then strain, pressing the water out of the toast with a spoon.

Add a pinch of salt and cream, sugar if desired. Serve cold. Good in case of WEAK STOMACH or DIARRHŒA.

COFFEE. Strong hot coffee is STIMULATING and INVIGORATING and should be given after EXPOSURE, FATIGUE, and after many cases of POISONING.

TEA. Tea is a REFRESHING and INVIGORATING drink and if made properly will not injure your patient. The best way to make an individual cup of tea is with a tea ball or small strainer. Pour hot water in the cup until the cup is hot. Empty this and fill the cup with freshly boiled water, immerse the tea ball or strainer containing tea until you have the desired strength. If served in the afternoon with a cracker, your patient may like a slice of lemon or orange in place of cream. It would be a good plan to make a small pot of tea and drink a cup yourself. Sit in a comfortable chair while you drink it and you may feel rested and refreshed as well as your patient. NEVER BOIL TEA. Always use an earthen ware, silver or granite ware

teapot. Scald the teapot with boiling water, empty, put in tea, and pour over it boiling water which is freshly boiled, not water which is in the tea kettle and warmed over. Let stand until the tea is the desired strength. The tea cosy so much used in England is the ideal arrangement for keeping tea hot while brewing. Both tea and coffee pots should be carefully washed, the spouts cleaned with a brush, and thoroughly dried. Scald at times with boiling water and baking soda. Many times, bad-tasting tea or coffee is due to improperly washed pots and not to the quality of tea and coffee purchased.

GUM ARABIC WATER. Dissolve 1 ounce of gum arabic in 1 pint of boiling water. Add 2 teaspoonfuls of sugar and a wine glass of sherry or the juice of 1 lemon. This is used for cases of POISONING.

LIME WATER. To 2 quarts of water add a lump of lime the size of an egg. Let stand a half-hour then stir and let settle again. Pour off water into a bottle carefully and cork. Used many times in milk for infants and invalids.

ALBUMEN WATER. One glass of cold water and white of 1 egg. Place in glass fruit jar and shake gently until egg and water are thoroughly mixed. Add salt or sugar to taste. This is **NUTRITIOUS**.

HOT LEMONADE. Mix 2 tablespoons lemon juice and 2 tablespoons granulated sugar and 1 tablespoon whiskey. Add 1 cup boiling water. This is to be served at bedtime with a cathartic for a **COLD**. This will be nourishing if made with rice or barley water.

HOT LEMONADE WITH GLYCERINE. To hot lemonade add 1 tablespoon of glycerine. Use this for people who do not like to take **CATHARTICS**. The glycerine will act as a cathartic and can not be tasted in the lemonade. (The patient need not be told about the glycerine.) **FOR COLDS.**

LIQUID DIET

When your patient is on a liquid diet you will give nourishment every two hours unless otherwise ordered by the doctor. Use less salt, sugar, or other seasoning of any kind, in food for sick people, adding a little more if needed after the patient has tasted. Do not serve the food without seasoning as the first swallow might be distasteful, causing the patient to think he does not care for that particular food, and limiting your menu. When giving liquid nourishment during the night use milk, broth, cocoa, eggnog flavored with vanilla or nutmeg, and avoid tea, coffee, or drinks containing wine, brandy, or stimulants, as these will usually cause wakefulness. When the patient needs a stimulant at night, it is ordered by the doctor, but in that case, stimulation is more important than sleep.

Quite a variety of nourishing foods can be given in liquid form. Milk is the most perfect liquid food but as sick persons become tired of one

thing, it is always best to give a variety. You can give milk every second or third time and at other times give broth, gruel, egg lemonade, or one of the liquid foods given below. By having a variety in the beginning, your patient will not tire of one food, and your task will be much easier.

You may give broths, gruels, milk, and drinks made with milk, soups made with milk, and strained, cooling and refreshing drinks made with fruit juices, gelatin jellies, and frozen liquids which will be greatly appreciated by fever patients and people who are sick in hot weather; frozen beef tea or beef juice, whipped cream, frozen egg-nog, clam juice, vanilla or chocolate ice cream (not very sweet), and orange or lemon ice. There are tiny freezers which hold enough for one person but if you do not possess one of these, try a large baking-powder can. Place this in a small pail of ice and salt (in winter use snow and salt). Open frequently and stir well while freezing. This answers very nicely.

LEMONADE MADE WITH SYRUP

Make a syrup by boiling 1 cup of water and 1 cup of sugar for 12 minutes. Cool and cover to be

used again. To 2 tablespoons of syrup use 1 tablespoon of lemon juice and $\frac{3}{4}$ cup of cold water. If syrup is used there will be no sugar settled in the bottom of the glass to make the last swallows too sweet. A leaf of mint or a slice of lemon or orange adds to the attractiveness. This will be nourishing as well as refreshing if made with albuminized water in place of plain cold water.

ORANGEADE

Juice of 1 orange, $1\frac{1}{2}$ tablespoons of syrup, 1 tablespoon crushed ice. Add syrup to orange juice and pour over ice. Less syrup will be needed if orange is sweet.

CURRENT OR GRAPE JELLY WATER

To 2 tablespoons of currant juice or 2 tablespoons of currant or grape jelly add $\frac{2}{3}$ cup cold water and season to taste with syrup. Stir jelly with a fork before adding water; it will mix more easily.

GRAPE JUICE

Wash and remove stems from $1\frac{1}{2}$ cups of ripe grapes, add 1 cup of cold water, and cook in a

double boiler until the juice is extracted. Strain through a sieve, add $\frac{1}{4}$ cup sugar, and return to the fire until the sugar is dissolved. Pour through a soft cloth which has been rung out of cold water. Chill and serve. If too strong, add a little water and a little lemon juice if desired.

TEA AND COFFEE

Tea and coffee may be served hot or iced with meals or as a stimulating drink between meals. When given as a nourishment cream should be added. Iced coffee should be seasoned the same as hot coffee but when iced tea is used to quench thirst, add a slice of lemon.

COCOA

Mix together 2 teaspoons of cocoa and 1 of sugar, add slowly $\frac{1}{2}$ cup boiling water, boil 3 minutes. Add $\frac{1}{2}$ cup scalded milk and beat with a Dover egg beater to prevent formation of scum. Pour into a clean, warm cup. This is more attractive with a spoonful of whipped cream on top. Some people like it flavored with a drop or two of vanilla.

EGG LEMONADE

Break a fresh egg in a bowl and beat until the white and yolk are well blended. Add one glass cold lemonade and strain. This is nourishing and refreshing.

MILK

Milk may be given plain, with lime water, with Appolinaris or Seltzer water; it may be sterilized, modified, or given with sugar and wine or brandy as a milk punch. Buttermilk is often used.

A glass of hot milk with a pinch of salt at bedtime often induces sleep.

A glass of hot milk with 2 tablespoons of sugar will, many times, stop a cough.

STERILIZED MILK

Put milk in a fruit jar which has been washed with soap, rinsed carefully, and scalded. Cover the top with absorbent cotton, two or three thicknesses of cheesecloth, or a piece of old, clean muslin. Place on the stove in a kettle of cold water with a tin or tiny board under the glass jar to keep it from breaking. Let the water come to a

boil and then remove the milk at once. Cool quickly and put on ice. Leave the cloth on the top of the jar.

ALBUMINIZED MILK

Put in a glass fruit jar the white of 1 egg and $\frac{1}{2}$ cup of milk. Shake gently until the egg and milk are thoroughly mixed. Season if desired with a pinch of salt or sugar and a drop of vanilla.

EGGNOG

Beat 1 egg until the white and yolk are well blended, add 1 tablespoon of sugar, a few grains of salt, $\frac{2}{3}$ cup of milk, and 2 tablespoons of wine or 1 tablespoon of brandy. Nutmeg may be used in place of the wine or brandy if the patient does not need stimulation.

KOUMISS

Warm 1 quart of milk to blood heat and add $1\frac{1}{2}$ tablespoons of sugar and $\frac{1}{4}$ of a yeast cake which has been dissolved in 1 tablespoon of lukewarm water. Fill bottles to within 1 $\frac{1}{2}$ inches of top, turn upside down, keep in a warm (not hot) place for 6 hours. Put on ice and serve the following day.

BROTH

Beef, chicken, lamb, or mutton broth are made by cutting the meat in small pieces, removing all skin and fat. Put, with the bones, in a stew pan and cover with cold water, using a pint of water for a pound of meat. Bring slowly to boiling point. Simmer for 4 hours, strain into bowl (not tin), and put on ice when cool. When needed for patient, remove all fat with a spoon. If when heated you see tiny globules of fat, pass a piece of tissue paper quickly over the top of the broth. In this way you can remove every particle of fat. The taste and smell of fat are often nauseating to sick people. Add salt and pepper to taste and if a piece of celery or parsley or a leaf of any favorite herb is boiled with the meat, a pleasant variety will be obtained. Beef makes a more nourishing broth than veal, fowl than young chicken, and mutton than lamb. Dilute with water if too strong.

CLAM BROTH

Scrub clean 6 or 8 large clams. Boil in 1 cup of water. The water and the juice of the clams make the broth. When the shells open the broth

is done. Remove clams and shells, add salt and pepper to taste. Pour in hot cup or bowl and place on top a spoonful of whipped cream. This can be served without the cream.

OYSTER BROTH

Chop 1 dozen oysters, put in a stew pan with 1 cup cold water. Bring to boiling point, then simmer 5 minutes. Strain and serve with whipped cream on top, or with milk added just before removing from the fire.

BEEF EXTRACT

One pound of round steak. Wipe and remove all fat. Cut in small pieces, place in a fruit jar, put cover on jar, and set in kettle of cold water. Put a tin or piece of board under the jar to prevent breaking. Let the water heat slowly for 2 hours but do not let it boil. Press the meat to obtain all the juice. Add salt and pepper and strain. This can be made in a double boiler. Do not boil when reheating.

BEEF TEA

Prepare steak the same as for beef extract. Soak beef in 1 pint of cold water for 15 minutes, then put steak and water in fruit jar and proceed

the same as in making beef extract. When serving, heat but do not boil.

BEEF JUICE

One pound of round steak. Remove all fat and cut in small pieces. Heat a fruit press or old-fashioned lemon squeezer in hot water and drain. Put the meat in a dry pan and shake over the fire until hot but not cooked. Put at once into press. Squeeze all the juice possible. More juice can usually be obtained by reheating both meat and press and squeezing again.

MEAT JELLIES

Cut chicken or other meat in small pieces, removing fat, and breaking bones. Put in cold water using 1 pint for every pound of meat. Heat slowly at first, then simmer until the meat is done. Strain and remove the fat by passing a tissue paper over the surface of the liquid. Add salt, pepper, and lemon to taste. Pour into small cups to set. When serving, turn out on a lettuce leaf if your patient is able to feed himself with a spoon. The jelly on a tray with a cup of tea or coffee or a glass of water will seem like a real meal while in reality it is only liquid diet.

GRUELS

FLOUR GRUEL

Two tablespoons of flour, 2 cups of milk. Mix flour with a little milk to make a paste. Scald the remainder of milk in a double boiler, add flour paste, and cook $\frac{1}{2}$ hour. Salt to taste. For DIARRHŒA.

OATMEAL GRUEL

Coarse oatmeal $\frac{1}{2}$ cup, add 3 cups boiling water and 1 teaspoon of salt. Cook 3 hours in a double boiler, strain, and add milk or cream. For a LAXATIVE.

CRACKER GRUEL

Roll and sift $\frac{1}{2}$ large cracker, have in a double boiler 1 cup scalded milk. Add cracker and cook for 5 minutes. Salt to taste. This is NUTRITIOUS.

INDIAN MEAL GRUEL

Mix 1 tablespoon Indian meal, $\frac{1}{2}$ tablespoon of flour, add enough cold water to make a paste.

Add to 2 cups of boiling water and boil gently for 1 hour. Add milk or cream and salt to taste. A richer gruel may be made by using milk in place of water and cooking 3 hours in a double boiler.

NOURISHING.

BARLEY GRUEL

Mix 3 teaspoons of barley flour with cold water to make a thin paste. Add to 1 cup boiling water and boil 15 minutes. Add $\frac{1}{2}$ cup milk and salt to taste. Reheat and strain when serving.

NUTRITIOUS.

Fruit jellies made with gelatin may be used with a liquid diet. Meat soups made with barley or rice, strained, and the fat removed, may be used.

Thin soups made with milk seasoned with a vegetable or meat broth may be used, also thicker soups made with a white sauce. Chicken or any meat broth may be used in the cream soups in place of milk.

WHITE SAUCE FOR CREAM SOUPS

The amount of butter, flour, and milk will differ with the different kinds of soup but the white

sauce is always made in one way. Melt the butter, add the flour, stirring all the time until they are smooth and thick. Add the milk a little at a time until it is all in, stirring each time you add milk until the mixture is smooth. To this is added the special mixture and seasoning

SOUPS MADE WITH MILK

From *Cook Book for Nurses* by Sarah C. Hill.

CREAM OF ASPARAGUS

White Sauce

One tablespoon butter, 1 tablespoon flour, $\frac{1}{2}$ cup milk.

Eight stalks of canned asparagus, drain from liquor, add $\frac{1}{2}$ cup fresh water. Heat thoroughly and press out all juice. Add to the white sauce. Fresh asparagus is better than canned if in season. Cook until very tender, strain, and add to white sauce. Salt and pepper to taste.

CREAM OF CELERY

White Sauce

$\frac{3}{4}$ tablespoon of butter, $\frac{3}{4}$ tablespoon of flour, 1 cup of milk.

Three sticks of celery, washed, cut in small pieces, and cooked in the milk for the white sauce 20

minutes in a double boiler. Salt and pepper to taste.

CREAM OF CHICKEN

White sauce

One tablespoon of butter, 1 tablespoon of flour, $\frac{1}{2}$ cup milk.

$\frac{1}{2}$ cup strong chicken broth. Remove carefully every particle of fat and heat before adding to white sauce. Salt and pepper to taste.

CREAM OF CLAM

White Sauce

One tablespoon of butter, 1 tablespoon of flour, $\frac{1}{2}$ cup milk.

$\frac{1}{2}$ cup hot clam broth. Pepper to taste.

CREAM OF CORN

White Sauce

One tablespoon of butter, 1 tablespoon of flour, $\frac{1}{2}$ cup milk.

$\frac{1}{2}$ cup canned corn, chopped, heated 20 minutes in $\frac{1}{2}$ cup water, strain, pressing out all the juice

possible. Add to white sauce. Salt and pepper to taste.

CREAM OF GREEN PEAS

White Sauce

$\frac{1}{2}$ tablespoon of butter, $\frac{1}{2}$ tablespoon of flour, $\frac{1}{2}$ cup milk.

$\frac{1}{2}$ cup canned or fresh cooked peas, drained and heated in $\frac{1}{2}$ cup cold water, rub through a sieve. Add to white sauce. Salt and pepper to taste.

CREAM OF ONION

White Sauce

$\frac{3}{4}$ tablespoon of butter, $\frac{3}{4}$ tablespoon of flour, 1 cup milk.

One onion cut up and scalded in milk for white sauce. Salt and pepper to taste.

CREAM OF POTATO

White Sauce

$\frac{1}{2}$ tablespoon of butter, $\frac{1}{2}$ tablespoon of flour, $\frac{3}{4}$ cup of milk.

$\frac{1}{4}$ cup hot mashed potato, add hot sauce slowly. Salt and pepper to taste. At serving

time add $\frac{1}{2}$ teaspoon of tomato catsup or 1 teaspoon of chopped parsley. A small slice of onion or a stick of celery may be scalded with the milk then strained out. Strain if soup contains lumps of potato. Thin with hot milk if desired.

CREAM OF TOMATO

White Sauce

1 tablespoon of butter, 1 tablespoon of flour, $\frac{1}{2}$ cup of milk.

$\frac{1}{2}$ cup stewed and strained tomato. Add a tiny pinch of baking soda before adding to the white sauce. Salt and pepper to taste. A small piece of bay leaf, 1 clove, and a small piece of onion may be cooked with the tomato.

LIGHT DIET

When your patient is better and the doctor says you may give him a light diet, continue the gruels, milk, and soups, or any other drink of which your patient has not become tired. You may give the cream soups with tiny squares of toast or crackers, the meat soups with the barley, rice, or tapioca left in them, and any well-cooked, soft cereal, boiled rice with sugar and cream (the rice must be well done), and also toast in many combinations, creamed or with hot milk, with creamed oysters, creamed codfish, or any other creamed fish which has not been fried, with poached or cod-dled eggs and with some creamed vegetables. You may give rice, tapioca, cornstarch, or bread puddings, fruit and gelatin jellies, ice creams and ices. Some doctors allow broiled steak, baked or broiled fish, creamed sweet breads, baked potato, and fresh fruit. It is best, however, to have a clear understanding with the doctor before you make any change in the diet.

CONVALESCENCE DIET

A person who has been ill, is still a patient until he is absolutely well, whatever he may think to the contrary. He will think up all kinds of terrible combinations of food and many times will eat things which he should not have unless you watch him carefully. I am not speaking of children. Just as long as he must remain in bed or in the house and maybe longer, great care must be taken with his diet. I knew of a man recovering from typhoid who had dismissed his trained nurse the day before, and was sitting by the window when a kind and generous neighbor arrived bearing a basket of pears. One who has had typhoid is always hungry. The warnings of the nurse were forgotten and the pears eaten. The man had a relapse and the nurse was again sent for in a hurry. I am not sure but that he died but I am not going to say so as this is a chapter on diets and not a tragedy.

Your convalescent patient must not be asked to digest any kind of fried food, under-done vegetables, fresh bread or biscuit, or food which takes a long time to digest, such as pork, boiled cabbage (raw cabbage is easier to digest), boiled

beets, rich cake or pies, and should have his hearty meal in the middle of the day.

He may have all things included in liquid and light diets; also peas, cauliflower, asparagus, potatoes (not fried, baked are best), water cress, lettuce, chicken, lamb, beef steak, roast beef, jellied chicken, or any dainty which you can concoct or which the neighbors bring in unless the doctor forbids. You may better err on the safe side. But with all this list to choose from your patient may demand such combinations as pork and cabbage or lobster salad and ice cream.

A FEW HELPFUL RECIPES

TOAST

Cut stale bread in quarter inch slices; remove the crusts. Place on a toaster for a few minutes then turn and dry on the other side. Keep turning the toast until it is an even brown but not burned. Butter and serve on a hot plate. It is much easier to eat if cut in narrow strips and looks nicely piled log cabin fashion

CREAM TOAST

Pour over toast a cream sauce made of butter, flour, and milk, add a lump of butter and a dash of black pepper or paprica. Garnish with a spray of parsley.

MILK TOAST

Pour over toast hot milk, to which has been added salt, pepper, and butter to taste. This is much more appetizing if the milk is carried to the

patient's room in a hot pitcher or cup and added to the toast just before it is eaten.

Toast may be used as a vehicle for many things and if only a small piece of broiled steak is allowed, it will seem a much larger meal if served on a nicely browned and buttered hot piece of toast. A spray of water cress or a slice of lemon will help the illusion. It may serve as a background for creamed oysters, creamed or buttered asparagus, creamed chicken, any minced and nicely seasoned meat, broiled oysters, thin broiled slices of bacon, or served with any of the cream soups, and who does not expect his first meal of real things to chew, to be egg on toast.

BRAN BREAD OR BISCUITS

1 pint of bran	$\frac{1}{2}$ pint of milk
$\frac{1}{2}$ pint of flour	6 tablespoons molasses
1 even teaspoon of baking soda	

Mix the bran, flour, and soda together; mix the molasses and milk together and add the flour mixture. Bake in gem pans or in bread tin. Two of these biscuits or two slices of bread eaten at each meal will act as a LAXATIVE and in most cases cure constipation.

EGGS

A soft egg should be boiled for 3 minutes. Dip the boiled egg in cold water and you will be able to handle it and in that way remove the egg before it has grown too hard in the hot shell. Put in a small glass, an egg cup, or on toast. Add salt and a tiny bit of pepper.

POACHED EGG

Have water boiling in a sauce pan and break into it the egg. Put the pan at once on the back of the stove or where it will not boil and let it stand until the white has set and a white film formed over the yolk. Lift with a skimmer or a mixing spoon with holes in it. Serve on hot buttered toast on a small warm plate, or with potato. The toast may be softened with hot water if desired. Add salt and pepper.

CODDLED EGGS

Place the egg in a bowl and pour over it 1 quart boiling water, cover at once and let stand from 8

to 10 minutes, or while you are making the toast, tea, etc. The white of the egg never is hard if cooked in this way and is easy to digest. It does not look as well as a poached egg when on toast but is better for invalids.

FRENCH OMELET

Beat 2 eggs until the white and yolk are well blended. Add 2 tablespoons milk, salt and pepper to taste. Butter a hot omelet or frying-pan with 1 tablespoon butter, turn in omelet. As soon as it begins to cook, turn carefully with a limber knife, let it brown on the bottom. Fold together and turn on a hot plate.

This must not be left while cooking as it burns very easily.

OTHER OMELETS

A variety of omelets can be made with the French omelet for a foundation. To the French omelet add a tablespoon of cooked asparagus tips, or a few well-cooked green beans or peas. If your patient is convalescing and is fond of onion, mince a slice of onion and fry in the butter

before adding the milk and egg. To this add a few tiny pieces of pimento, the green beans, or asparagus and serve with a baked potato or hot buttered toast.

SOFT CUSTARD

Beat yolks of 2 eggs, add 2 tablespoons sugar, and a few grains of salt. Heat 1 cup milk in a double boiler and stir in gradually the egg and sugar. Cook until it thickens, strain, cool, and add a few drops of vanilla.

BAKED CUSTARD

Beat slightly 1 small egg, add 1 tablespoon sugar and a few grains of salt. Add egg and sugar to $\frac{1}{2}$ cup hot milk, strain into a cup, sprinkle with nutmeg, and place in a pan of hot water. Bake in slow oven until firm.

JUNKET CUSTARD

Heat 1 cup milk until lukewarm, add 1 tablespoon sugar. As soon as sugar is dissolved add $\frac{1}{4}$ Junket tablet which has been dissolved in 1 tea-

spoon of cold water and $\frac{1}{2}$ tablespoon brandy, or $\frac{1}{4}$ teaspoon vanilla. Pour at once into small glasses or molds. Let stand until firm, then put in cool place until ready to serve.

WHAT TO DO IN EMERGENCIES

Johnnie Jones and his sister Sue, not only eat peaches of emerald hue, but they step on rusty nails, tumble into the pond, climb apple trees and fall out again, breaking their arms, legs, and collar bones, cut themselves with knives, broken glass, or old tins, get fish hooks in their fingers, run slivers in their toes when they go bare-footed, and get stung when they inspect the hives to see how the bees are working. Busy mother Jones must doctor the children, administer reproof for past carelessness, caution for days to come, and if father Jones has sunstroke, gets into poison ivy, or a venomous snake "sees him first," she must be able to do the right thing at the right time. This is as important a part of home keeping as cooking or sewing. An efficient mother feeds the body and mind, binds up the wounds, and heals the broken hearts.

Read carefully the chapter on emergencies, poisons, and bandaging. You may not remember

the directions but you will know exactly where to find them when wanted in a hurry.

BURNS

When a burn or scald covers only a small surface and is not deep it can be treated at home. If the burn is deep, or if not deep, should cover a large surface of the body, a doctor must be called at once. As a rule the surface covered by a burn and not the depth of it, is what matters. If more than one third of the body is covered by the burn, death is probable and will surely follow if two thirds of the skin is destroyed.

If your clothing catches on fire, lie down and roll or wrap around you a rug, blanket, or anything you can catch up, but do not run. If you run, the draft formed by your movements will fan the flames in the same way that a fire is fanned by blowing with a bellows. Keep your mouth closed so you will not inhale the smoke and do not waste your breath in screams. Work. If another person is on fire, wrap her quickly in a couch-cover, rug, drapery, or any clothing, preferably woolen, which you can reach quickly. Put your patient on the floor and roll her up from head to

foot. Fire cannot burn if the air is kept from it. This you do by covering your patient or yourself. Keep the covers on until you are sure the fire is extinguished then you can call help. Do not shriek, throw your apron over your head and scream, "fire! she is dead!" but put out the fire, then call someone to help you and send for a doctor. Whatever you do, keep cool. Screaming causes confusion and panic and the patient, if badly burned, has enough to bear without extra fireworks on the part of the family or the neighbors. Keep the patient lying down with her head lowered, loosen her clothing, and keep her quiet. Cut away the clothing from the burned surface. If the clothing sticks to the burn do not pull it off but soak with olive oil, when it can be easily removed. Take care not to irritate the burned surface and if blisters have formed, do not break them. Wet soft cotton cloths or old handkerchiefs in a strong solution of baking soda and cool water and cover burns. Coarsely woven gauze is used, many times, in dressing burns but the threads stick in the wound and are difficult to remove. A soft, closely woven cloth is much better.

A small burn may be treated in the same way

at first, then use vaseline, carbolized vaseline, olive oil, oxide of zinc ointment, or lard. With a clean knife spread the vaseline or ointment, generously, on a clean, soft linen or cotton cloth and apply to the burn, holding in place with a bandage, not too tightly put on.

A patient having a bad burn is liable to suffer from shock and should be given treatment for it. Vomiting is a good symptom. The patient may not be unconscious and still suffer from shock. Keep her quiet; permit no extra people in the room. All people who are not caring for the patient are extra. Raise the foot of the bed so that the blood will enter the brain, give fresh air and stimulating drinks such as, milk with whiskey or wine, cocoa cordial, or eggnog with whiskey. Place a hot-water bag at her feet and do not discuss the accident, the extent of the patient's injuries, or any other subject, in the patient's room. Do all you can for the patient and then keep her, the family, and yourself quiet until the doctor arrives.

BURNS CAUSED BY ACIDS

Wash burns quickly with lime water, baking soda and water, or soapsuds. Then treat in the

same way as burns caused by fire. If acid is in the eye, wash the eye quickly with clear water then with lime water.

BURNS CAUSED BY ALKALIES (LIME)

Wash the burn with vinegar or lemon juice then dress in the same way as other burns. Take great care in removing clothing.

ARTIFICIAL RESPIRATION

Dr. Sylvester's method of artificial respiration is considered by most authorities to be the best.

Lay the patient on his back on the ground or floor, loosen belts and tight bands. Place, under his shoulder blades, a roll of clothing (a coat will do), a hard pillow, or anything that will raise him, in order that his chest will be higher than the rest of his body. Do not let his head hang back. Put a small pad under it if it is in an unnatural position. Have someone hold his tongue. It will not slip from the fingers if held with a dry cloth or handkerchief. If you are working alone tie one corner of the handkerchief around the tongue and fasten the opposite corner to the patient's clothing. If the tongue is not kept out of the mouth it may fall back in the throat, stopping the air passages.

Kneel at the patient's head and taking a wrist in each hand, draw the arms out and up, keeping them near the ground until you have them well above the head. Stretch the arms and hold in this position while you slowly count three. This expands the chest and air will rush into the lungs. Then bring the elbows slowly down and press them firmly against the sides of the chest. This forces the air out of the lungs. Again slowly count three. These movements should be done over and over again with regularity, until the patient begins to breathe. Do not get discouraged and give up in a short time. Work for at least an hour. Persons apparently lifeless have been revived after hours of artificial respiration. In case the patient stops breathing you must begin all over again. Do not leave him until you are sure he is conscious and breathing regularly.

IN CASE OF DROWNING

As soon as the patient is taken from the water, clean his mouth of mud and water with a handkerchief or anything handy. Loosen all tight bands, belts, etc. Turn him on his face, stand over him, astride, put your arms under his abdomen and raise him up in order that the water may

drain out of his throat and lungs. Hold him this way while you count fifteen. Turn him on his back, pull out his tongue, and proceed to give artificial respiration as described above. If there are two people to help, one should proceed with artificial respiration while the other goes for a doctor and brings blankets, if they can be procured, hot-water bottle, and stimulants. If the accident happens in the woods or far from town or a house, the second helper should remove the wet clothing and cover the patient with his own clothes. The helpers can work very well in their underclothes, using their own for the patient. Build a fire near enough to warm but not to endanger the patient. As quickly as the patient begins to breathe and not before, rub his arms and legs, rubbing toward his heart. This helps to restore the circulation. As the patient begins to breathe for himself he may vomit or have a chill, or both. If he vomits, turn him on his right side so the vomited matter will not strangle him. As quickly as possible after he has begun to breathe, put him in bed in warm blankets with hot-water bags or bottles. Give him hot coffee or other stimulants. If he is hungry give him beef tea or hot milk but no solid food until ordered by the doctor. Keep

him quiet and let him sleep. He will be weak and nervous and should stay in bed until fully recovered and should see no visitors.

Remember that the life of the patient depends upon your keeping your wits about you. The directions for procedure in artificial respiration should be learned by heart by everyone living near a lake or river or even a little pond. A person can drown in very little water. Make this one of the things to be taught in your home, for no one knows how soon such knowledge will be needed, and how thankful you will be if you or your family can save a life. If children in school could be taught to give artificial respiration it would be a fine thing. Not learned in parrot fashion, "now all together, tell what to do when one falls in the water," but let each child demonstrate and tell why he does things as he does them. Be sure that he understands. This is as necessary in some communities as the fire drill and would be a good gymnastic exercise as well, for it is no easy task to give artificial respiration for any length of time.

TOOTHACHE

Clean the cavity in the tooth if it can be reached, with a bit of absorbent cotton on a toothpick.

Then put a piece of cotton which has been dipped in oil of cloves, in the tooth. Camphor will sometimes stop the pain. If you cannot reach the cavity, place a small piece of absorbent cotton which has been dipped in camphor, between the cheek and the gum. A hot-water bag is a great comforter. At the earliest possible moment take the sufferer to the dentist. Teeth always stop aching when the dentist is mentioned but it is only a bluff on the part of the tooth and should not be allowed to deceive any one. That tooth is only waiting for a cold, damp night to start in again on its vicious career and should be attended to at once.

EARACHE

This is sometimes caused by decayed teeth and treatment of the bad tooth may stop the earache. If not, the ear must be treated to stop the pain for the time being and a doctor consulted as soon as possible as there may be trouble in the ear which, if neglected, will lead to greater pain and deafness. A hot-water bag or hot woolen cloth over the ear will sometimes relieve the pain. If not, hold a teaspoon in hot water until the spoon is hot, drop three or four drops of sweet oil on the

hot spoon (this will warm the oil) then drop into the ear and plug with a warm piece of absorbent cotton. If you have opium or laudanum in the house, drop two drops of one of these and three drops of sweet oil on the hot spoon and drop in the ear. The hot-water bag should have only a little water in it so it will lie flat over the ear and not be heavy. Earache is a very hard pain to bear and should have immediate attention.

STIES

If a person has a sty on his eye he should see a doctor, as it may mean a rundown condition or defective eyes. Hot or cold applications relieve the pain. Hot applications should not be continued on the eye for more than five minutes at a time. There have been cases where the eye was permanently injured by poulticing. If a cold compress is comforting to the patient it is much wiser to use it. If the sty needs to be lanced it had best be done by a doctor. If you must have it opened at home be sure the needle or instrument used is made surgically clean by boiling and that the pus does not get in the eye.

HEAT RASH OR PRICKLY HEAT

This is a common affliction of small children during hot weather. Bathe frequently and powder with talcum powder or cornstarch. If this does not correct the condition, bathe in soda bath (*see* chapter on baths) or lime water. Reduce the amount of clothing and keep the patient as quiet as possible.

CHILL

A chill may be due to cold, exposure, nervousness, or may be caused by absorption of poisons. Put the patient in a warm bed with warm flannel blankets around him, hot-water bags at feet, between thighs, and over heart. Rub limbs and body briskly to bring the blood to the surface. Give hot drinks, such as, tea, coffee, hot lemonade or hot water and whiskey. If the chill is caused by cold, exposure, or nervousness the patient will probably recover in a short time but if the patient has a wound or if the chill is after childbirth, the doctor should be notified at once as the patient is probably absorbing poisons and needs immediate attention.

SNAKE BITE

Not many poisonous snakes are met now-a-days but a snake bite should have instant attention. The bite is usually on the foot or leg. Tie your handkerchief, belt, suspender, or strip from the bottom of a skirt tightly around the leg between the bite and the body. This will prevent the poisoned blood from reaching the body. Squeeze the wound and if water is at hand wash it. You must work quickly. Put your mouth over the bite and suck as hard as you can, expectorate and suck again. You will be able to remove much of the poison in this way with no danger to yourself unless you have a sore in your mouth. Do this the instant the bite occurs, then put strong ammonia on the bite, and send for the doctor. Do not leave the bandage longer than one half hour without loosening it. If the doctor has not arrived by that time loosen the bandage a little so that the blood may flow a tiny bit, then tighten it again. If the bandage is kept tight, there can be no circulation of the blood and mortification will be caused thereby. If the bandage is loosened and a little blood is allowed to flow toward the body, the effect will not be as

bad as if all the poison were allowed to go there at once. The patient may be strong enough to absorb the poison without disastrous results if it is taken into the system slowly. Some authorities advise stimulating with whiskey or brandy and others, equally wise, say that it is not necessary. In this case one must use his own judgment. After the patient is out of danger exterminate the snakes.

MOSQUITO BITES

Put, at once, a drop of ammonia on the mosquito bite and do not scratch it. Dust with talcum powder.

INSECTS AND SPIDERS

Apply ammonia to the sting or bite. If the sting is still in the flesh remove it with dressing forceps. Apply wet salt and wet cloths or if away from the house, apply wet earth.

POISON IVY

Over the rash-covered skin lay cloths wet in a strong solution of baking soda and water. Dress later with oxide of zinc ointment.

POISON PLANTS, MUSHROOMS, ETC.

See chapter on poisons. Use remedy for ptomaine poisoning.

SUNBURN

One may suffer much from sunburn. Bathe in solution of baking soda and water, then apply vaseline, olive oil, ointment, or cold cream.

FAINTING

Fainting may be caused by foul air, exhaustion, hunger, pain, or fright. Lay the patient down, give all the fresh air possible, loosen clothing, and dash cold water on face and chest. Smelling salts or ammonia should be used but care must be taken not to get them in the patient's eyes or too near the mouth or nose. The head must be lower than the rest of the body so the blood will flow to the brain. Rub to help circulation and keep the patient quiet until fully recovered.

SUNSTROKE

Send for the doctor and apply ice to the head. If you have no ice use cloths wet in cold water.

Give a cold bath in tub if possible, if not give cooling bath described in chapter on baths. If there is little help the cooling bath on the bed will be best, as it is very hard to manage a helpless person in a tub. The pulse and temperature must be watched carefully. If the temperature drops quickly the patient must, at once, be put in blankets and heat applied to the feet. The temperature must be taken every five minutes. If the temperature rises, renew the ice on the head and the cooling bath. When the patient is conscious give cold water to drink but no stimulants. The pulse must be taken often as there is danger of heart failure.

CHOKING

When a person is choking on something which has been swallowed (fish bone or food), give at once the white of an egg without beating. If the patient has swallowed a sharp substance, have him eat generously of bread, potato, or mush. If a child chokes hold him up by his heels and shake him. An older person can be laid on a chair with head hanging down. Strike sharply on the back between the shoulders.

DUST OR CINDERS IN THE EYE

Wash the eye with clear water, using a dropper or an eye cup. If you have neither of these, drop water from a spoon. The head should be held on one side with the eye open and care taken not to touch the eyeball with the spoon. A tiny piece of cotton on a toothpick will sometimes remove obstinate particles of dirt. If the eye is painfully inflamed or you are not able to remove the irritation, consult an oculist (eye doctor) at once.

BITES OF DOGS, CATS, RATS, ETC.

Wash, at once, if possible in clean water, suck the wound, and apply ammonia as in snake bite. These bites must not be neglected as they sometimes cause grave trouble.

FOREIGN BODIES IN THE NOSE

When the baby puts in her nose, a peanut, bean, bead, or any of the things which babies are so fond of storing in their noses, have her take a long breath and have her blow her nose while you hold tightly closed, the nostril which has not been used as a storehouse. This may dislodge the object. Try this several times before giving up. If you are not able to dislodge it, take baby

to the doctor as it must not stay in the nose. Inexperienced people should consult a doctor about any foreign object in nose, throat, eye, or ear. Do not poke in your ears or your children's either with toothpicks or hair-pins. Let their ears alone, except to wash them carefully, unless there is trouble or pain. In that case take them to a doctor.

NOSE BLEED

Keep the patient quiet with the head high. Apply ice or cold cloths to the back of the neck and firmly pinch the nose closing the nostrils. If this does not stop the flow of blood, pack the nostrils with absorbent cotton wet in vinegar and cold water, or in alum water and put feet and hands in hot water. The patient should not lie down unless very weak. Let him sit up with head thrown back.

FISHHOOK ACCIDENTS

When a fishhook is caught in the flesh beyond the upper end of the barb, it should never be pulled out the way it went in but should be pushed through the flesh until the barb is clear, then clip the hook in half with heavy nippers. This wound should never be covered with new skin or plaster

but should be washed carefully, soaked, and squeezed in clean water (boiled water if possible), and then bound up in a sterilized dressing. If soreness or inflammation follow, see a doctor at once, as a fishhook wound may easily be the beginning of blood poisoning.

CUTS

Dipping a cut in very hot water will stop the bleeding. Look carefully to see that it contains no dirt or other substance and bind up in a sterilized dressing. If it is a small cut on the finger it will heal of itself if kept covered and clean. A large cut may need stitches and should be examined by a doctor.

PUNCTURED WOUNDS CAUSED BY OLD NAILS, SPLINTERS OF OLD WOOD, GARDEN TOOLS, AND TOY PISTOLS

A wound of this kind is not dangerous because of the instrument which caused it, but because of the germs which may have been on the instrument. Children playing out of doors or around barns are likely to step on rusty nails or run slivers of old wood in their hands or feet. Nails or slivers or even garden tools may carry tetanus

(lockjaw) germs. These germs are very much at home around horse barns or in manured fields or gardens. Toy pistols are another cause of many cases of lockjaw. The reason for this is that the child's hands are dirty and the dirt is carried into the wound. The caps are made of paper which is capable of carrying the tetanus germs. The symptoms, as a rule, will not be noticed until about a week after the injury. The wound should be thoroughly cleansed with clean warm water and not covered with plaster or new skin. Put on a clean dressing and take the child to the doctor at once. He will probably give antitoxin which may prevent further trouble.

CONVULSIONS

Convulsions in children are usually caused by indigestion. The child should be put in a hot bath. If you have no bathroom or large tin bath pan use a wash tub. Put cold cloths on the patient's head while he is in the bath. Give a soap and water enema and send for the doctor as the case may be serious. If you have no bath thermometer try the water in the old-fashioned way by holding your elbow in it or by trying it with your tongue, then you will not burn your patient.

HEAT EXHAUSTION

As a rule a patient suffering from heat exhaustion will not be unconscious. The skin will be cold and damp and the breathing shallow and fast. The patient will have a weak pulse and should be put in bed with warm blankets and hot-water bottles and should be given hot coffee or hot water and whiskey.

FROSTBITE

Do not let the person suffering from frostbitten fingers, toes, ears, or feet go near the fire. Do not apply heat to the frostbite but rub, very gently, the afflicted place with cold water or snow. A foot or hand may be held in a basin of cold water and gently rubbed. Rub with a towel or your hand until the circulation is reestablished. Should heat be applied to a frostbite, mortification of the part might be the result.

SPRAINS

When your patient has (as he thinks) sprained his ankle, leg, or arm, elevate the afflicted part and support as comfortably as possible on pillows. Very cold or very hot cloths should be applied and the doctor called as there may be more serious complications than are apparent to either you or the patient.

BROKEN BONES

When lifting a patient who has a broken bone, be careful to support the limb both above and below the injury. Do not twist it or try to move it at all as this will cause intense pain and do more harm than good. Make your patient as comfortable as possible and call a doctor. If the patient must be moved, put a board, the ironing board or long sticks, under the limb, moving it as little as possible and tying both sides of the break. The patient may better wait some time for the doctor than permit someone who does not know how, to try to remedy the hurt. Moving a broken bone tears the muscle around the ragged ends of the bone and adds to the injury. Keep the patient quiet and apply cold wet cloths to the injured place. This will control the swelling, making the bone easier to "set."

WOUNDS AND HEMORRHAGE

The *Red Cross Textbook* (General Edition) costs but thirty-five cents and contains many illustrated methods of controlling hemorrhages.

This book should be in every house.

The blood from a wounded artery is bright

red and flows in spurts. Pressure must be applied ABOVE the wound, or between the wound and the heart. If the wound is on the arm or leg, lay a small hard object (a pocket-knife or a small flat stone) over the artery above the wound and tie tightly in place with a handkerchief, a strip torn from a skirt, or any other bandage. Keep the limb raised. If the bleeding is on the body, try pressing around the wound with your finger until you locate the artery. If this is in a place where you can apply a hard compress, do so. Apply very cold, clean, wet cloths or cracked ice in a clean cloth. Remove tight clothing and get a doctor as quickly as possible. Do not give stimulating drinks until ordered by the doctor unless you have been able to stop the bleeding, or the patient is very weak. Keep the patient quiet and give fresh air.

Blood from a wounded vein is a dark purplish color and flows steadily. Raise the limb. If the bleeding does not stop make gentle pressure BELOW the wound. Wash the wound by pouring over it sterilized water (see sterilized water, chapter on medicine closet). Cover with a clean dressing and bandage tightly. If the wound is serious and yet not bleeding freely, do not try to dress it but send for the doctor and make your

patient as comfortable as possible. If you dress the wound you may infect it and no harm will be done by waiting until the doctor arrives.

When an accident occurs you will have no time to look in the book to see if it is an artery or a vein that is bleeding and where you must put the bandage. Remember it in this way. A stands for ARTERY, A also stands for ABOVE. A wounded ARTERY is tied ABOVE the wound. So, of course, a wounded VEIN is tied BELOW.

BANDAGING

The Red Cross Emergency or First Aid outfit comes in different-sized packages. In these are bandages and illustrated directions for applying them. There is a cardboard box, costing \$1.50, which should be in every home medicine closet, and a tin box, costing \$3.00 which should be in every automobile. These useful aids are now generally kept in places where people are likely to be hurt while working. These boxes contain, beside the antiseptic surgical supplies, a small booklet which gives explicit directions and illustrations for using the different bandages and supplies.

An artistic bandager gains the art by long practice in clinic or hospital, and uses many

kinds of bandages. For bandages which will be put on at home, two kinds will answer. Any one can wind a long narrow bandage around and around an arm or leg to hold a dressing in place. That is the simplest bandage. Another simple but very useful bandage is the four-tailed one. This is made from a piece of cloth about eight inches wide and about a yard long, or long enough to go over the head and tie. If it is used for a knee bandage it should be about one quarter of a yard wide and one and one quarter of a yard long. For an elbow, one a little shorter will do. The size of the patient will govern the size of the bandage. To make the bandage cut the cloth in the middle from each end to from six or eight inches of the center.

As a simple diagram explains better than a great deal of description, you can see exactly how to apply your bandage by looking at the drawings on the next three pages.

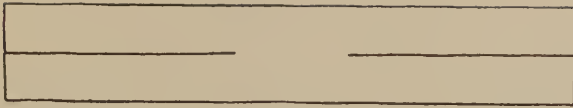


FIG. 1.—Four tailed bandage.



FIG. 2.—Four tailed bandage on top of head.



FIG. 3.—Four tailed bandage on back of head.



FIG. 4.—Four tailed bandage on front of head.



FIG. 5.—Four tailed bandage on chin with extra piece to hold it in place.

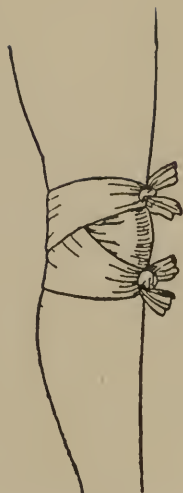


FIG. 6.—Four tailed bandage on knee.

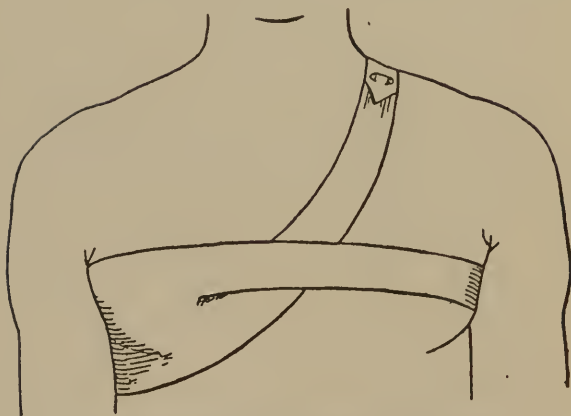


FIG. 7.—Four tailed bandage on breast.



FIG. 8.—Four tailed bandage on elbow.



FIG. 9.—The way to roll a long narrow bandage.

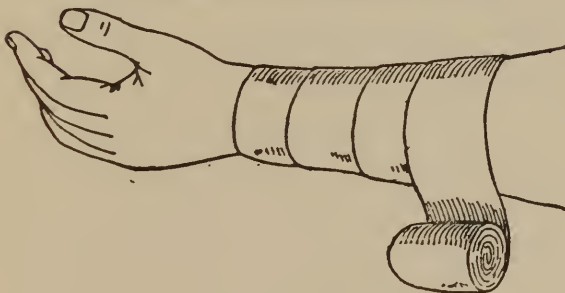


FIG. 10.—Long narrow bandage on arm.

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